
LIST OF EXHIBITS ATTACHED

- | | |
|---|-----------|
| 1. Medical Records of Plaintiff's History of Diabetes | Exhibit 1 |
| 2. Medical Records of Dr. Lopez Denying Diabetes Medication | Exhibit 2 |
| 3. Medical Records of Plaintiff's Toe Amputation | Exhibit 3 |
| 4. FBOP's denial of Plaintiff's BP-11 | Exhibit 4 |
| 5. Affidavit of Plaintiff | Exhibit 5 |

**Bureau of Prisons
Health Services**

EXHIBIT-1

Clinical Encounter - Administrative Note

Inmate Name:	MUNIZ, ROLANDO	Reg #:	81986-280
Date of Birth:	08/24/1980	Sex:	M
Note Date:	03/27/2014 15:18	Facility:	MCR
		Unit:	Z01
		Face:	WHITE
		Provider:	West Jennifer APRN

Medication Reconciliation encounter performed at Health Services.

Administrative Notes:

ADMINISTRATIVE NOTE 1

Provider: West, Jennifer APRN

Inmate arrived in A & O medications reconciled pending follow up.

RECEIVED

FEB 15 2022

AT 8:30
WILLIAM T. WALSH
CLERK

ASSESSMENTS:

Diabetes, type II w/oth spec manifestation, uncont, 250.82 - Current, Chronic, Not Assessed

Hyperlipidemia, mixed, 272.2 - Current, Chronic, Not Assessed

Hypertension, Benign Essential, 401.1 - Current, Chronic, Not Assessed

Renew Medication Orders:

<u>Rx#</u>	<u>Medication</u>	<u>Order Date</u>	<u>Prescriber Order</u>
372029-OKL	Lisinopril 20 MG Tab	03/27/2014 15:18	Take one tablet by mouth each day x 14 day(s)
	Indication: Hypertension, Benign Essential		
	One Time Dose Given: No		
372030-OKL	metFORMIN 500 MG Tab	03/27/2014 15:18	Take one and one-half (1 and 1/2) tablets (750mg) by mouth twice daily x 14 day(s)
	Indication: Diabetes, type II w/oth spec manifestation, uncont		
	One Time Dose Given: No		
372031-OKL	Simvastatin 20 MG Tab	03/27/2014 15:18	Take one tablet by mouth at bedtime x 14 day(s)
	Indication: Hyperlipidemia, mixed		
	One Time Dose Given: No		

Copay Required: No

Cosign Required: No

Telephone/Verbal Order: No

Completed by West, Jennifer APRN on 03/27/2014 15:21

**Bureau of Prisons
Health Services****Clinical Encounter - Administrative Note**

Inmate Name:	MUNIZ, ROLANDO	Reg #:	81986-280
Date of Birth:	08/24/1980	Sex:	M Race: WHITE
Note Date:	03/31/2014 09:11	Facility:	MCR
		Provider:	Onuoha, Jude M.D./CD
		Unit:	Z01

Chronic Care encounter performed at Health Services.

Administrative Notes:

ADMINISTRATIVE NOTE 1 **Provider:** Onuoha, Jude M.D./CD

see h & p done today for CCC and medical decision making

Seen for clinic(s): Diabetes, Endocrine/Lipid

Added to clinic(s): Diabetes, Endocrine/Lipid

Copay Required: No

Cosign Required: No

Telephone/Verbal Order: No

Completed by Onuoha, Jude M.D./CD on 03/31/2014 09:13



Federal
Bureau of
Prisons

FMC Butner
1000 Old Highway NC 75
Butner, NC 27509
919-575-3900 x5707

*** Sensitive But Unclassified ***

Name MUNIZ, ROLANDO
Reg # 81986-280
DOB 08/24/1980
Sex M

Facility USP McCreary
BUX Unit
Provider Jude Onuoha, MD

Collected 04/01/2014 6:23
Received 04/02/2014 10:26
Reported 04/02/2014 19:09
LIS ID 092141292

CHEMISTRY, URINE

Random mALB Creat ratio:

Category	Result
Normal	Less than 30
Microalbuminuria	30 - 299
Clinical albuminuria	Greater than 300

The ADA recommends that at least two of three specimens collected within a 3 - 6 month period be abnormal before considering a patient to be within a diagnostic category.
ADA Diabetes Care, Col. 34: S34, 2011 299ADA Diabetes Care V34 S34 2011e

SPECIAL CHEMISTRY

TSH	0.474	0.350-4.940	uIU/mL
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HEMATOLOGY / COAG

WBC		9.8	4.0-11.0	K/uL
RBC		4.88	4.50-6.00	M/uL
HGB	L	13.3	13.5-18.0	g/dL
HCT		40.7	40.0-52.0	%
MCV		83.5	80.0-100.0	fL
MCH		27.3	25.4-34.6	pg
MCHC		32.7	31.0-37.0	g/dL
RDW	H	15.3	11.0-15.0	%
Platelet		211	150-400	K/uL
MPV	H	11.1	7.0-11.0	fL
Neutrophils #		5.3	1.5-7.1	K/uL
Lymphocytes #	H	3.5	0.9-3.3	K/uL
Monocytes #		0.7	0.3-1.1	K/uL
Eosinophil #		0.3	0.0-0.7	K/uL
Basophil #		0.1	0.0-0.2	K/uL
Neutrophils %		53.9	40.0-75.0	%
Lymphocytes %		35.6	15.0-45.0	%
Monocytes %		6.8	6.0-15.0	%
Eosinophils %		2.9	0.0-7.0	%
Basophils %		0.8	0.0-2.0	%

HEMOGLOBIN A1C

Hemoglobin A1C	H	7.9	4.0-6.0	%
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FLAG LEGEND

L=Low LI=Low Critical H=High HI=High Critical A=Abnormal AI=Abnormal Critical

Federal
Bureau of
Prisons**PMC Butner**
1000 Old Highway NC 75
Butner, NC 27509
919-575-3900 x5707

*** Sensitive But Unclassified ***

Name MUNIZ, ROLANDO
Reg # 81986-280
DOB 08/24/1980
Sex M**Facility** USP McCreary
BUX Unit
Provider Jude Onuoha, MD**Collected** 04/01/2014 6:23
Received 04/02/2014 10:26
Reported 04/02/2014 19:09
LIS ID 092141292**CHEMISTRY, URINE****HEPATITIS**

HBsAg	Non-Reactive	Non-Reactive
HBsAb	Non-Reactive	Non-Reactive
Hep A IgM	Non-Reactive	Non-Reactive
HCV	Non-Reactive	Non-Reactive

FLAG LEGEND

L=Low LI=Low Critical H=High HI=High Critical A=Abnormal AI=Abnormal Critical

Inmate Name: MUNIZ, ROLANDO Reg #: 81986-280
 Date of Birth: 08/24/1980 Sex: M Race: WHITE
 Encounter Date: 07/02/2014 13:32 Provider: Hall, Paul RN Facility: SEA

Renew Medication Orders:

Rx#	Medication	Order Date	Prescriber Order
395316-OKL	metFORMIN 500 MG Tab	07/02/2014 13:32	Take one and one-half (1 and 1/2) tablets (750mg) by mouth twice daily -- note dosage x 60 day(s)

Start Now: Yes

Night Stock Rx#:

Source: In-transit meds

Admin Method: Self Administration

Stop Date: 08/31/2014 13:31

MAR Label:

One Time Dose Given: Yes

395317-OKL	Simvastatin 20 MG Tab	07/02/2014 13:32	Take one tablet by mouth at bedtime x 60 day(s)
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Start Now: Yes

Night Stock Rx#:

Source: In-transit meds

Admin Method: Self Administration

Stop Date: 08/31/2014 13:31

MAR Label:

One Time Dose Given: Yes

Instructed inmate how to obtain medical, dental, and mental health care.

Copay Required: No Cosign Required: Yes

Telephone/Verbal Order: Yes By: Duckworth, A. MD

Telephone or Verbal order read back and verified.

Completed by Hall, Paul RN on 07/02/2014 13:41

Requested to be cosigned by Duckworth, A. MD.

Cosign documentation will be displayed on the following page.

Requested to be reviewed by Resto, William MD.

Review documentation will be displayed on the following page.

**Bureau of Prisons
Health Services**

Clinical Encounter - Administrative Note

Inmate Name:	MUNIZ, ROLANDO	Reg #:	81986-280
Date of Birth:	08/24/1980	Sex:	M Race: WHITE
Note Date:	04/20/2017 18:07	Provider:	McKiddy, Crystal PA-C
		Facility:	MCR
		Unit:	Z04

Admin Note - Orders encounter performed at Health Services.

Administrative Notes:

ADMINISTRATIVE NOTE 1 **Provider:** McKiddy, Crystal PA-C

Inmates labs reviewed noted to not be have sufficient immunity to hep b; will order vaccine.

A1c 7.8% at this time; will adjust medication and order follow up labs

New Medication Orders:

<u>Rx#</u>	<u>Medication</u>	<u>Order Date</u>	<u>Prescriber Order</u>
	metFORMIN Tablets	04/20/2017 18:07	1000mg Orally - Two Times a Day x 180 day(s)

Indication: Diabetes, type II w/oth spec manifestation, uncont

Discontinued Medication Orders:

<u>Rx#</u>	<u>Medication</u>	<u>Order Date</u>	<u>Prescriber Order</u>
163727-MCR	metFORMIN 500 MG Tab	04/20/2017 18:07	Take one tablet (500 MG) by mouth twice daily

Discontinue Type: When Pharmacy Processes

Discontinue Reason: new order written

Indication:

New Laboratory Requests:

<u>Details</u>	<u>Frequency</u>	<u>Due Date</u>	<u>Priority</u>
Chronic Care Clinics-Diabetic-CBC	One Time	10/17/2017 00:00	Routine
Chronic Care Clinics-Diabetic-Hemoglobin A1C			
Lab Tests-F-Ferritin			
Lab Tests-I-Iron			
Lab Tests-I-Iron & TIBC (%sat)			
Chronic Care Clinics-Diabetic-Microalbumin & Creatinine, Urine Random			
Chronic Care Clinics-Diabetic-Comprehensive Metabolic Profile (CMP)			

Labs requested to be reviewed by: Cunnagin, Carrie DO

Schedule:

<u>Activity</u>	<u>Date Scheduled</u>	<u>Scheduled Provider</u>
Hepatitis B Series Immunization	04/21/2017 00:00	IOP/IDC
Start Hep B series		

**Bureau of Prisons
Health Services**

Clinical Encounter - Administrative Note

Inmate Name:	MUNIZ, ROLANDO	Reg #:	81986-280
Date of Birth:	08/24/1980	Sex:	M Race: WHITE
Note Date:	05/30/2017 15:26	Provider:	Cunnagin, Carrie DO
		Facility:	MCR
		Unit:	Z04

Admin Note - Orders encounter performed at Health Services.

Administrative Notes:

ADMINISTRATIVE NOTE 1 **Provider:** Cunnagin, Carrie DO

Order for metformin 1000mg BID placed. Inmate reports he hasn't had any metformin for 2 weeks.

Renew Medication Orders:

<u>Rx#</u>	<u>Medication</u>	<u>Order Date</u>	<u>Prescriber Order</u>
163725-MCR	Atorvastatin 10 MG Tab Indication: Hyperlipidemia, mixed	05/30/2017 15:26	Take one tablet (10 MG) by mouth each day Note: this replaces Simvastatin x 180 day(s)
163726-MCR	Lisinopril 10 MG Tab Indication: Diabetes, type II w/oth spec manifestation, uncont	05/30/2017 15:26	Take one tablet (10 MG) by mouth each day x 180 day(s)
166116-MCR	metFORMIN 1000 MG Tab Indication: Diabetes, type II w/oth spec manifestation, uncont	05/30/2017 15:26	Take one tablet (1000 MG) by mouth two times a day x 180 day(s)

Copay Required: No **Cosign Required:** No

Telephone/Verbal Order: No

Completed by Cunnagin, Carrie DO on 05/30/2017 15:29

Inmate Name: MUNIZ, ROLANDO	Sex: M	Race: WHITE	Reg #: 81986-280
Date of Birth: 08/24/1980	Provider: Floyd, Brett RN	Facility: MNA	Unit: C01
Encounter Date: 06/16/2017 08:00			

Wheelchair given to reduce compression of feet.
 Stay off your feet as much as possible
 Do not walk around without shoes on.
 Check your feet daily.

Patient Education Topics:

<u>Date Initiated</u>	<u>Format</u>	<u>Handout/Topic</u>	<u>Provider</u>	<u>Outcome</u>
06/16/2017	Handout	Diabetes - Foot Care	Floyd, Brett	Verbalizes Understanding
06/16/2017	Counseling	Safety/Injury Prevention	Floyd, Brett	Verbalizes Understanding
06/16/2017	Counseling	Plan of Care	Floyd, Brett	Verbalizes Understanding
06/16/2017	Counseling	Hand & Respiratory Hygiene	Floyd, Brett	Verbalizes Understanding

Copay Required: Yes **Cosign Required: Yes**
Telephone/Verbal Order: Yes **By: Albu-Gardner, Nikki MLP**
Telephone or Verbal order read back and verified.

Completed by Floyd, Brett RN on 06/16/2017 08:25
 Requested to be cosigned by Albu-Gardner, Nikki MLP.
 Cosign documentation will be displayed on the following page.

Bureau of Prisons

Health Services

Cosign/Review

Inmate Name:	MUNIZ, ROLANDO	Reg #:	81986-280
Date of Birth:	08/24/1980	Sex:	M
Encounter Date:	06/16/2017 08:00	Provider:	Floyd, Brett RN
		Race:	WHITE
		Facility:	MNA

~~Cosigned with New Encounter Note by Albu Gardner, Nikki MLP on 06/16/2017 11:08.~~

**Bureau of Prisons
Health Services**

Clinical Encounter - Administrative Note

Inmate Name:	MUNIZ, ROLANDO	Reg #:	81986-280
Date of Birth:	08/24/1980	Sex:	M
		Race:	WHITE
Note Date:	06/16/2017 11:08	Facility:	MNA
		Unit:	C01
		Provider:	Albu-Gardner, Nikki MLP

Cosign Note - Clinical Encounter Cosign encounter performed at Health Services.

Administrative Notes:

ADMINISTRATIVE NOTE 1 **Provider:** Albu-Gardner, Nikki MLP

He is to use wheelchair and follow up Monday, wound care in clinic.

Copay Required: No

Cosign Required: No

Telephone/Verbal Order: No

Completed by Albu-Gardner, Nikki MLP on 06/16/2017 11:11

**Bureau of Prisons
Health Services
Cosign/Review**

Inmate Name: MUNIZ, ROLANDO
Date of Birth: 08/24/1980
Encounter Date: 06/19/2017 13:34

Sex: M
Provider: Albu-Gardner, Nikki MLP

Reg #: 81986-280
Race: WHITE
Facility: MNA

Cosigned with New Encounter Note by Lopez, H. MD/SER MAST PHYSICIAN on 06/27/2017 07:35.

**Bureau of Prisons
Health Services
Clinical Encounter**

Inmate Name: MUNIZ, ROLANDO	Sex: M	Race: WHITE	Reg #: 81986-280
Date of Birth: 08/24/1980	Provider: Worlds, Richetta RN,	Facility: MNA	Unit: C01
Encounter Date: 07/25/2017 10:52			

Nursing - Follow up encounter performed at Health Services.

SUBJECTIVE:

COMPLAINT 1 **Provider:** Worlds, Richetta RN, IOP/IDC

Chief Complaint: Skin Problem

Subjective: Inmate is here today for follow up of blisters to bottom of left foot. Inmate reports area has gotten smaller but has not completely resolved.

Pain: No

OBJECTIVE:

Temperature:

<u>Date</u>	<u>Time</u>	<u>Fahrenheit</u>	<u>Celsius</u>	<u>Location</u>	<u>Provider</u>
07/25/2017	10:52 MNA	98.1	36.7	Oral	Worlds, Richetta RN, IOP/IDC

Pulse:

<u>Date</u>	<u>Time</u>	<u>Rate Per Minute</u>	<u>Location</u>	<u>Rhythm</u>	<u>Provider</u>
07/25/2017	10:52	82	Via Machine	Regular	Worlds, Richetta RN, IOP/IDC

Respirations:

<u>Date</u>	<u>Time</u>	<u>Rate Per Minute</u>	<u>Provider</u>
07/25/2017	10:52 MNA	14	Worlds, Richetta RN, IOP/IDC

Blood Pressure:

<u>Date</u>	<u>Time</u>	<u>Value</u>	<u>Location</u>	<u>Position</u>	<u>Cuff Size</u>	<u>Provider</u>
07/25/2017	10:52 MNA	119/77	Left Arm	Sitting	Adult-regular	Worlds, Richetta RN, IOP/IDC

Exam:

General

Appearance

Yes: Appears Well, Alert and Oriented x 3

Skin

General

Yes: Within Normal Limits

Lesions

No: Drainage

Pulmonary

Observation/Inspection

Yes: Within Normal Limits

Cardiovascular

Observation

Yes: Within Normal Limits

ASSESSMENT:

Skin Integrity, Alteration in

P: Small, calloused area noted to bottom of left foot. No bleeding or drainage noted to site. Inmate advised to keep area clean, covered. Return to sick call as needed. Inmate voiced understanding of. Will monitor.

Inmate Name: MUNIZ, ROLANDO	Sex: M	Race: WHITE	Reg #: 81986-280
Date of Birth: 08/24/1980	Facility: MNA	Unit: C01	
Encounter Date: 08/08/2017 13:25	Provider: Albu-Gardner, Nikki MLP		

New Medication Orders:

<u>Rx#</u>	<u>Medication</u>	<u>Order Date</u>	<u>Prescriber Order</u>
	Terazosin Capsule	08/08/2017 13:25	1 mg Orally each evening x 180 day(s)

Indication: Diabetes, type II w/oth spec manifestation, uncent

Ibuprofen Tablet	08/08/2017 13:25	800 mg Orally - three times a day x 7 day(s)
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Indication: Low back pain**New Laboratory Requests:**

<u>Details</u>	<u>Frequency</u>	<u>Due Date</u>	<u>Priority</u>
Lab Tests-C-Culture, GC (N. gonorrhoeae)/Chlamydia	One Time	08/22/2017 00:00	Routine

Lab Tests-C-Culture, Urine

Labs requested to be reviewed by: Lopez, H. MD/SER MAST PHYSICIAN**Disposition:**

Follow-up at Sick Call as Needed

Follow-up at Chronic Care Clinic as Needed

Patient Education Topics:

<u>Date Initiated</u>	<u>Format</u>	<u>Handout/Topic</u>	<u>Provider</u>	<u>Outcome</u>
08/08/2017	Counseling	Access to Care	Albu-Gardner, Nikki	Verbalizes Understanding
08/08/2017	Counseling	Compliance - Treatment	Albu-Gardner, Nikki	Verbalizes Understanding
08/08/2017	Counseling	Plan of Care	Albu-Gardner, Nikki	Verbalizes Understanding

Copay Required: No**Cosign Required:** No**Telephone/Verbal Order:** No

Completed by Albu-Gardner, Nikki MLP on 08/08/2017 13:49

**Bureau of Prisons
Health Services
Clinical Encounter**

Inmate Name: MUNIZ, ROLANDO	Sex: M Race: WHITE	Reg #: 81986-280
Date of Birth: 08/24/1980	Provider: Albu-Gardner, Nikki MLP	Facility: MNA
Encounter Date: 11/20/2017 09:24		Unit: C02

Chronic Care - Chronic Care Clinic encounter performed at Health Services.

SUBJECTIVE:

COMPLAINT 1 **Provider:** Albu-Gardner, Nikki MLP

Chief Complaint: Chronic Care Clinic

Subjective: 37 year old male with DM and Hyperlipidemia. He is being evaluated for possible urinary stricture-recurrent UTI and difficulty urinating. PSA is normal 0.4 He is also complaining of left hip pain/buttock with radiation into the left leg-to the left calf. X-Rays of L-spine and Hip are negative.

Pain: No

Seen for clinic(s): Diabetes, Endocrine/Lipid

OBJECTIVE:

Temperature:

<u>Date</u>	<u>Time</u>	<u>Fahrenheit</u>	<u>Celsius</u>	<u>Location</u>	<u>Provider</u>
11/20/2017	09:09 MNA	97.0	36.1		Gibson, Kawandra LPN

Pulse:

<u>Date</u>	<u>Time</u>	<u>Rate Per Minute</u>	<u>Location</u>	<u>Rhythm</u>	<u>Provider</u>
11/20/2017	09:09	78			Gibson, Kawandra LPN

Respirations:

<u>Date</u>	<u>Time</u>	<u>Rate Per Minute</u>	<u>Provider</u>
11/20/2017	09:09 MNA	16	Gibson, Kawandra LPN

Blood Pressure:

<u>Date</u>	<u>Time</u>	<u>Value</u>	<u>Location</u>	<u>Position</u>	<u>Cuff Size</u>	<u>Provider</u>
11/20/2017	09:09 MNA	126/84				Gibson, Kawandra LPN

Blood Glucose:

<u>Date</u>	<u>Time</u>	<u>Value (mg/dl)</u>	<u>Type</u>	<u>Regular Insulin</u>	<u>Provider</u>
11/20/2017	09:23	154	Random		Albu-Gardner, Nikki MLP

Weight:

<u>Date</u>	<u>Time</u>	<u>Lbs</u>	<u>Kg</u>	<u>Waist Circum.</u>	<u>Provider</u>
11/20/2017	09:09 MNA	199.0	90.3		Gibson, Kawandra LPN

Exam:

General

Appearance

Yes: Appears Well

Eyes

General

Yes: PERRLA, Extraocular Movements Intact

Pupils

Yes: Normal Appearing

Inmate Name: MUNIZ, ROLANDO	Sex: M	Race: WHITE	Reg #: 81986-280
Date of Birth: 08/24/1980	Provider: Albu-Gardner, Nikki MLP	Facility: MNA	Unit: C02
Encounter Date: 11/20/2017 09:24			

Exam:**Fundus Exam**

Yes: Grossly Normal Retina

Mouth**General**

Yes: Within Normal Limits

Neck**General**

Yes: Within Normal Limits

Pulmonary**Observation/Inspection**

Yes: Within Normal Limits

Auscultation

Yes: Clear to Auscultation

Cardiovascular**Auscultation**

Yes: Regular Rate and Rhythm (RRR), Normal S1 and S2

No: M/R/G, S3, S4

Abdomen**Auscultation**

Yes: Normo-Active Bowel Sounds

Palpation

Yes: Within Normal Limits

Musculoskeletal**Hip**

Yes: Full Range of Motion, Muscle Spasm, Inflammation, Tenderness

Neurologic**Cranial Nerves (CN)**

Yes: Within Normal Limits

Motor System-General

Yes: Normal Exam

Motor System-Strength

Yes: Normal Muscular Strength

Exam Comments

M. Strength intact: able to walk on heels and toes

Monofilament: sensory intact to dorsal and decreased to plantar surfaces B/L

Callouses present, no closed or open lesions

Pedal Pulses palpable B/L

Risk Category:

3 h/o plantar ulcerations

ASSESSMENT:

Diabetes, type II w/oth spec manifestation, uncont, 250.82 - Current

Hyperlipidemia, mixed, 272.2 - Current

Tachycardia, unspecified, 785.0 - Resolved

Inmate Name: MUNIZ, ROLANDO	Sex: M	Race: WHITE	Reg #: 81986-280
Date of Birth: 08/24/1980	Facility: MNA	Unit: C02	
Encounter Date: 11/20/2017 09:24	Provider: Albu-Gardner, Nikki MLP		

Enlarged prostate without lower urinary tract symptoms (BPH), N400 - Current

Low back pain, M545 - Current

Urinary tract infection, site not specified, N390 - Current

PLAN:

New Medication Orders:

<u>Rx#</u>	<u>Medication</u>	<u>Order Date</u>	<u>Prescriber Order</u>
	Terazosin Capsule	11/20/2017 09:24	Orally(1) 2 mg at bedtime x 10 day(s) -- *** (2) 3 mg each evening x 10 day(s) -- *** (3) 5 mg at bedtime x 30 day(s) --
	Indication: Enlarged prostate without lower urinary tract symptoms (BPH)		
	MethylPREDNISolone Tab 4 MG (Dose Pack 21 tab)	11/20/2017 09:24	as directed Orally - daily x 6 day(s)
	Indication: Low back pain		
	Ciprofloxacin Tablet	11/20/2017 09:24	500 mg Orally - Two Times a Day x 10 day(s)
	Indication: Urinary tract infection, site not specified		

Renew Medication Orders:

<u>Rx#</u>	<u>Medication</u>	<u>Order Date</u>	<u>Prescriber Order</u>
178120-MNA	Atorvastatin 10 MG Tab	11/20/2017 09:24	Take one tablet (10 MG) by mouth each day x 180 day(s)
	Indication: Hyperlipidemia, mixed		
178121-MNA	Lisinopril 10 MG Tab	11/20/2017 09:24	Take one tablet (10 MG) by mouth each day x 180 day(s)
	Indication: Diabetes, type II w/oth spec manifestation, uncont		
178122-MNA	metFORMIN 1000 MG Tab	11/20/2017 09:24	Take one tablet (1000 MG) by mouth two times a day x 180 day(s)
	Indication: Diabetes, type II w/oth spec manifestation, uncont		

Discontinued Medication Orders:

<u>Rx#</u>	<u>Medication</u>	<u>Order Date</u>	<u>Prescriber Order</u>
180105-MNA	Terazosin HCl 1 MG Cap	11/20/2017 09:24	Take one capsule (1 MG) by mouth each evening

Discontinue Type: When Pharmacy Processes

Discontinue Reason: Order changed

Indication:

Inmate Name: MUNIZ, ROLANDO

Date of Birth: 08/24/1980

Encounter Date: 11/20/2017 09:24

Sex: M Race: WHITE

Provider: Albu-Gardner, Nikki MLP

Reg #: 81986-280

Facility: MNA

Unit: C02

Discontinued Medication Orders:

<u>Rx#</u>	<u>Medication</u>	<u>Order Date</u>	<u>Prescriber Order</u>
184166-MNA	Amoxicillin/Clav 875/125MG TAB	11/20/2017 09:24	Take one tablet by mouth twice daily for 10 days

Discontinue Type: When Pharmacy Processes**Discontinue Reason:** discontinue**Indication:****New Laboratory Requests:**

<u>Details</u>	<u>Frequency</u>	<u>Due Date</u>	<u>Priority</u>
Lab Tests - Short List-General-CBC w/diff	One Time	12/07/2017 00:00	Routine
Lab Tests - Short List-General-Ferritin			
Lab Tests-C-Culture, Urine			
Lab Tests - Short List-General-Iron & TIBC (%sat)			

Labs requested to be reviewed by: Lopez, H. MD/SER MAST PHYSICIAN**New Non-Medication Orders:**

<u>Order</u>	<u>Frequency</u>	<u>Duration</u>	<u>Details</u>	<u>Ordered By</u>
Blood Pressure	Weekly	30 days		Albu-Gardner, Nikki MLP

Disposition:

Follow-up at Sick Call as Needed

Follow-up at Chronic Care Clinic as Needed

Other:

Urology and Optometry consults are pending.

Patient Education Topics:

<u>Date Initiated</u>	<u>Format</u>	<u>Handout/Topic</u>	<u>Provider</u>	<u>Outcome</u>
11/20/2017	Counseling	Access to Care	Albu-Gardner, Nikki	Verbalizes Understanding
11/20/2017	Counseling	Compliance - Treatment	Albu-Gardner, Nikki	Verbalizes Understanding
11/20/2017	Counseling	Plan of Care	Albu-Gardner, Nikki	Verbalizes Understanding

Copay Required: No**Cosign Required:** Yes**Telephone/Verbal Order:** No

Completed by Albu-Gardner, Nikki MLP on 11/20/2017 09:48

Requested to be cosigned by Lopez, H. MD/SER MAST PHYSICIAN.

Cosign documentation will be displayed on the following page.

**Bureau of Prisons
Health Services
Medical Duty Status**

Reg #: 81986-280

Inmate Name: MUNIZ, ROLANDO

Housing Status

☐ confined to the living quarters except ☐ meals ☐ pill line ☐ treatments Exp. Date: _____

☐ on complete bed rest: ☐ bathroom privileges only Exp. Date: _____

☒ cell: ☐ cell on first floor ☐ single cell ☒ lower bunk ☐ airborne infection isolation Exp. Date: 11/01/2018

☒ other: Diabetic Pill Line Exp. Date: 12/20/2017

Physical Limitation/Restriction

☐ all sports Exp. Date: _____

☐ weightlifting: ☐ upper body ☐ lower body Exp. Date: _____

☐ cardiovascular exercise: ☐ running ☐ jogging ☐ walking ☐ softball Exp. Date: _____

☐ football ☐ basketball ☐ handball ☐ stationary equipment

☐ other: _____ Exp. Date: _____

May have the following equipment in his / her possession:

Equipment	Start Date	End Date	Return Date
Alternate Institutional Shoes	06/16/2017	11/01/2020	

Work Restriction / Limitation:

Cleared for Food Service: Yes

☒ No Restrictions

Comments: N/A

Albu-Gardner, Nikki MLP

11/20/2017

Health Services Staff

Date

Inmate Name: MUNIZ, ROLANDO Reg #: 81986-280 Quarters: B04**ALL EXPIRATION DATES ARE AT 24:00**

**Bureau of Prisons
Health Services
Immunizations**

Begin Date: 11/29/2016**End Date:** 11/29/2017**Reg #:** 81986-280**Inmate Name:** MUNIZ, ROLANDO

<u>Immunization</u>	<u>Immunization Date</u>	<u>Administered</u>	<u>Location</u>	<u>Dosage</u>	<u>Drug Mfg.</u>	<u>Lot #</u>	<u>Exp Date</u>
Hepatitis B Series	08/03/2017	Now	Left Deltoid	1mL	GSK	943y5	06/30/2019
Orig Entered: 08/03/2017 14:22 EST Floyd, Brett RN							
Hepatitis B Series	05/01/2017	Now	Right Deltoid	0.5mL	GSK	H57AC	09/30/2018
Orig Entered: 05/01/2017 10:42 EST Stephens, Neil RN							
Influenza - Trivalent	03/20/2017	Now	Left Deltoid	0.5mL	Seqirus	14249221A	06/30/2017
Orig Entered: 03/20/2017 10:02 EST Stephens, Neil RN							
Influenza - Immunization	10/26/2017	Now	Left Deltoid	0.5mL	Other	XF33008	06/30/2018
Afluria							
Orig Entered: 10/26/2017 09:45 EST Worlds, Richetta HSA							
Measles/Mumps/Rubella Series	06/15/2017	Refused					
Orig Entered: 06/15/2017 11:08 EST Williams, Stephanie CNA							
Tdap	07/14/2017	Refused					
Refusal Signed							
Orig Entered: 07/14/2017 12:15 EST Floyd, Brett RN							
Total: 6							



U.S. DEPARTMENT OF JUSTICE
FEDERAL BUREAU OF PRISONS
3625 FCI ROAD
MARIANNA, FL 32446

CONTRACT FOR MEDICAL EQUIPMENT /SUPPLIES

INMATE NAME: Muniz, Rolando

REGISTER NO.: 81986.280

I acknowledge that I have received the item(s) listed below. These items were purchased by the Health Service Department solely for me in order to accommodate my medical needs.

I understand that the items issued to me this date will not be replaced if they are lost, stolen, misplaced or any factor other than normal wear and tear prior to one year from the date issued.

I also understand this equipment is not to be altered unless specially requested and/or performed by Health Service Staff. I am aware that I will be held responsible for any alterations and/or damages to the equipment outside of normal wear and tear. I will not use the item(s) listed below in any manner that violates Bureau Policy and if found to be used for such purposes I will be subject to appropriate disciplinary action.

Quantity	Item	Model	Model Number	Serial Number	Description	Issue Date	Receive Date
1 pr					Apex Tennis Shoes		
					Size 13 @		
					Grey turquoise and white		

[Signature]
Inmate Signature

1/10/18
Date

P. Smith
Staff Issuing Glasses

P. Smith, Allied Health Tech
FCI Marianna, FL

1/10/18
Date

EXHIBIT-1**Bureau of Prisons****Health Services****Clinical Encounter - Administrative Note**

Inmate Name:	MUNIZ, ROLANDO	Reg #:	81986-280
Date of Birth:	08/24/1980	Sex:	M Race: WHITE
Note Date:	02/16/2017 14:23	Facility:	MCR
		Unit:	Z04
		Provider:	McKiddy, Crystal PA-C

Admin Note - Medication Reconciliation encounter performed at Health Services.

Administrative Notes:**ADMINISTRATIVE NOTE 1** **Provider:** McKiddy, Crystal PA-C

Inmate arrived on medications. Medications to be continued as current, or substituted per formulary availability. Medications available in the commissary must be purchased in the commissary. Patient to be followed at CCC as scheduled, at sick call PRN, or at A/O physical appointment if indicated.

Medication Reconciliation.

The patient's known medication list including OTC items was compiled and compared to new and changed BOP orders.

Renew Medication Orders:

<u>Rx#</u>	<u>Medication</u>	<u>Order Date</u>	<u>Prescriber Order</u>
600913-OKL	Atorvastatin 10 MG Tab	02/16/2017 14:23	Take one tablet (10 MG) by mouth each day Note: this replaces Simvastatin x 14 day(s)
	Indication: Hyperlipidemia, mixed		
603881-OKL	Clotrimazole Cream 1% 28.35GM	02/16/2017 14:23	Apply a small amount topically to the affected area(s) twice daily - Wash hands well before and after use x 14 day(s)
	Indication: Diabetes, type II w/oth spec manifestation, uncont		
600910-OKL	Lisinopril 10 MG Tab	02/16/2017 14:23	Take one tablet (10 MG) by mouth each day x 14 day(s)
	Indication: Diabetes, type II w/oth spec manifestation, uncont		
600911-OKL	metFORMIN 500 MG Tab	02/16/2017 14:23	Take one tablet (500 MG) by mouth twice daily x 14 day(s)
	Indication: Diabetes, type II w/oth spec manifestation, uncont		
600912-OKL	Naproxen 500 MG Tab	02/16/2017 14:23	Take one tablet (500 MG) by mouth each day x 14 day(s)
	Indication: Diabetes, type II w/oth spec manifestation, uncont		

Reconciled Medications:

<u>Source</u>	<u>Action</u>	<u>Type</u>	<u>Rx#</u>	<u>Medication</u>	<u>Order Detail</u>
BOP	Continue	Rx	600913-OKL	Atorvastatin 10 MG Tab	Take one tablet (10 MG) by mouth each day Note: this replaces Simvastatin
BOP	Continue	Rx	603881-OKL	Clotrimazole Cream 1% 28.35GM	Apply a small amount topically to the affected area(s) twice daily - Wash hands well before and after use

Inmate Name: MUNIZ, ROLANDO Reg #: 81986-280
 Date of Birth: 08/24/1980 Sex: M Race: WHITE Facility: MCR
 Note Date: 02/16/2017 14:23 Provider: McKiddy, Crystal PA-C Unit: Z04

Source	Action	Type	Rx#	Medication	Order Detail
BOP	Continue	Rx	600910-OKL	Lisinopril 10 MG Tab	Take one tablet (10 MG) by mouth each day
BOP	Continue	Rx	600911-OKL	metFORMIN 500 MG Tab	Take one tablet (500 MG) by mouth twice daily
BOP	Continue	Rx	600912-OKL	Naproxen 500 MG Tab	Take one tablet (500 MG) by mouth each day
		OTC	No known OTCs		

Disposition:

Follow-up at Sick Call as Needed
 Follow-up at Chronic Care Clinic as Needed

Patient Education Topics:

Date Initiated	Format	Handout/Topic	Provider	Outcome
02/16/2017	Counseling	Access to Care	McKiddy, Crystal	Verbalizes Understanding
02/16/2017	Counseling	Plan of Care	McKiddy, Crystal	Verbalizes Understanding

Copay Required: No Cosign Required: Yes
 Telephone/Verbal Order: No

Completed by McKiddy, Crystal PA-C on 02/16/2017 14:26
 Requested to be cosigned by Cunnagin, Carrie DO.
 Cosign documentation will be displayed on the following page.
 Requested to be reviewed by Woods, J. FNP-C.
 Review documentation will be displayed on the following page.

ADMINISTRATIVE NOTE

2-2-17 & 1405

Ord. Date 02/02/17 MUNIZ, ROLANDO Petry, G. MD/CD
81988-280 KWO R01 (8) Refills
Exp. Date 04/03/17 Take one tablet (10 MG) by mouth each day
#7 TAB
600910-OKL Lisinopril 10 MG Tab

Ord. Date 02/02/17 MUNIZ, ROLANDO Petry, G. MD/CD
81988-280 KWO R01 (8) Refills
Exp. Date 04/03/17 Take one tablet (500 MG) by mouth twice daily
#14 TAB
600911-OKL metFORMIN 500 MG Tab

Ord. Date 02/02/17 MUNIZ, ROLANDO Petry, G. MD/CD
81988-280 KWO R01 (8) Refills
Exp. Date 04/03/17 Take one tablet (500 MG) by mouth each day
#7 TAB
600912-OKL Naproxen 500 MG Tab

Ord. Date 02/02/17 MUNIZ, ROLANDO Petry, G. MD/CD
81988-280 KWO R01 (8) Refills
Exp. Date 04/03/17 Take one tablet (10 MG) by mouth each day Note: this replaces Simvastatin
#7 tab
600913-OKL Atorvastatin 10 MG Tab

Place medication label here.

Place medication label here.

Place medication label here.

Place medication label here.

Place medication label here.

FEB 03 2017

G. Petry, MD
FTC - Oklahoma CityB. Hamburger, Pharm D
FTC-Oklahoma City

Medication Sheet-Health Services Unit

BF4103139

Inmate Name	Register No.	Institution
MUNIZ, ROLANDO 81986280		Federal Transfer Center Oklahoma City, OK

A. INMATE NEEDS FOLLOW-UP FOR THE FOLLOWING: (Provider will review inmate responses and comment where necessary)

ISSUE OR CONDITION	Yes	No	COMMENTS (Indicate if urgent and treatment is necessary)
Infectious disease:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	ZIKA SCREENING: PREGNANT INMATES 1. Have you been in a country recently that is known to have a history of Zika transmission? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> 2. Do you have a history, during pregnancy, of having had a male sexual partner who has been in an area with active Zika virus transmission? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Answers "yes" to either question, please isolate as needed for symptomology and alert the Clinical Director as soon as possible. Record findings in BEMR.
Draining skin lesions:	<input type="checkbox"/>	<input type="checkbox"/>	
Signs of lice?	<input type="checkbox"/>	<input type="checkbox"/>	
Signs of scabies?	<input type="checkbox"/>	<input type="checkbox"/>	
Skin condition: Include trauma, bruises/abrasions, recent tattoos, needle marks, or other indications of drug use			
Drug/alcohol withdrawal <input checked="" type="checkbox"/> denies at this time			
Mental Health Issues			
Pain Management			
Physical disabilities/deformities			
Cardiovascular disease			
Diabetes			
Asthma			
Cancer			
Dental problems			
OB/GYN			
Other:			

B. OTHER COMMENTS OR PHYSICAL FINDINGS: (Record vital signs if indicated)

	Yes	No	
Meds	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Medication Allergies: <u>AKDA</u> Current Medical Status: No complaints/Complains of: TB Symptoms: <u>NONE</u> , Cough, Hemoptysis, Night Sweats, Wt. Loss Cleared for GENERAL POPULATION *Cadre inmates will be assessed for restrictions during BEMR intake
Hot Meds	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Meds Issued	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Dose Given	<input type="checkbox"/>	<input checked="" type="checkbox"/>	

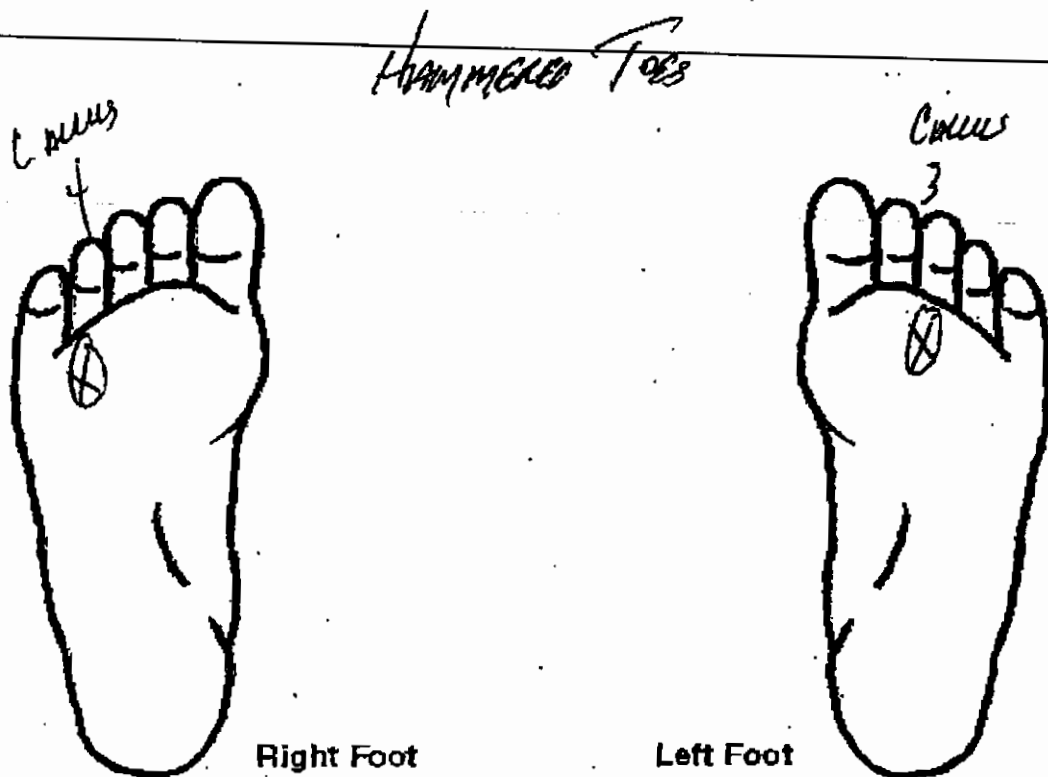
C. MEDICATION AND OTHER ORDERS WRITTEN IN BEMR

D. MEDICATION CONSENT FORM IN BEMR

E. INSTRUCTED INMATE HOW TO OBTAIN MEDICAL, DENTAL, AND MENTAL HEALTH SERVICES

PROVIDER: sign next to your name		
Adams, H. RN	Ralls, C. RN	Marcus Kessler, RN
Genzer, J. RN	Genzer, T. RN	Markelia Taylor, RMA
Mann, D. RN	Sternmark, T. RN	
Rodden, R. RN	Blunk, T. RN	
Wagoner, D. RN	Ruiz, A. RN	
Date: 2/2/17	Time:	

Indicate on the diagram below location and description of clinical concerns, including, but not limited to the following: ulcerations, callus formation, nails, drainage, amputations, deformities, edema, sensation, infections, discoloration, hair patterns, etc.



Protective sensation is present (If utilized, Indicate filament size <input type="checkbox"/> N/A)	Right	6	Filament (gm)	Plantar surface	Left	6	Filament (gm)
	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			Great toe distal phalanx	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			Fourth toe distal phalanx	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			First metatarsal joint	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			Third metatarsal joint	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			Fifth metatarsal joint	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		

Ulcer Grade (Indicate on drawing)

- ☒ 0- Intact skin ☐ 1- Superficial ☐ 2- Tendon or bone depth ☐ 3- Abscess or osteomyelitis ☐ 4- Forefoot gangrene
☐ 5- Foot gangrene Other _____

Proprioception: ☒ Normal ☐ Limited/describe: _____

Vascularity: ☒ Normal ☐ Limited/describe: _____

Additional observations, including gait:

Patient wears 11 1/2-12 - measures 13

Indicate on the diagram below location and description of clinical concerns, including, but not limited to the following: ulcerations, callus formation, nails, drainage, amputations, deformities, edema, sensation, infections, discoloration, hair patterns, etc.

Callus



Right Foot

Hammered Toes

Callus



Left Foot

Protective sensation is present (if utilized, indicate filament size)
☐ N/A

Right /6 Filament (gm)	Plantar surface	Left /6 Filament (gm)
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Great toe distal phalanx	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Fourth toe distal phalanx	<input type="checkbox"/> Yes <input type="checkbox"/> No
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	First metatarsal joint	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Third metatarsal joint	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Fifth metatarsal joint	<input type="checkbox"/> Yes <input type="checkbox"/> No

Ulcer Grade (Indicate on drawing)

- ☒ 0- Intact skin ☐ 1- Superficial ☐ 2- Tendon or bone depth ☐ 3- Abscess or osteomyelitis ☐ 4- Forefoot gangrene
☐ 5- Foot gangrene Other _____

Proprioception: ☒ Normal ☐ Limited/describe: _____

Vascularity: ☒ Normal ☐ Limited/describe: _____

Additional observations, including gait

Patient wears 11 1/2-12 - measures 13

Bureau of Prisons
Health Services
Clinical Encounter - Administrative Note

Inmate Name:	MUNIZ, ROLANDO	Reg #:	81986-280
Date of Birth:	08/24/1980	Sex:	M
		Race:	WHITE
Note Date:	07/09/2018 12:02	Facility:	MNA
		Unit:	C02
		Provider:	Lopez, H. MD/SER

Cosign Note - Chart Review encounter performed at Health Services.

Administrative Notes:

ADMINISTRATIVE NOTE 1

Provider: Lopez, H. MD/SER MAST PHYSICIAN

Hemoglobin A1C H 6.6

Other:

already pending CCC follow up with the MLP.

Copay Required: No

Cosign Required: No

Telephone/Verbal Order: No

Completed by Lopez, H. MD/SER MAST PHYSICIAN on 07/09/2018 12:03

**Bureau of Prisons
Health Services
Cosign/Review**

Inmate Name:	MUNIZ, ROLAND●	Reg #:	81986-280
Date of Birth:	08/24/1980	Sex:	M
Encounter Date:	07/30/2018 14:11	Provider:	Albu-Gardner, Nikki MLP
		Race:	WHITE
		Facility:	MNA

Cosigned by Intriago, Gloria MD on 07/31/2018 13:24.

Bureau of Prisons**Health Services****Medical Duty Status**

Reg #: 81986-280

Inmate Name: MUNIZ, ROLANDO

Housing Status☐ confined to the living quarters except ☐ meals ☐ pill line ☐ treatments Exp. Date: _____☐ on complete bed rest: ☐ bathroom privileges only Exp. Date: _____☒ cell: ☐ cell on first floor ☐ single cell ☒ lower bunk ☐ airborne infection isolation Exp. Date: 11/01/2020☒ other: Diabetic Pill Line Exp. Date: 08/28/2020**Physical Limitation/Restriction**☐ all sports Exp. Date: _____☐ weightlifting: ☐ upper body ☐ lower body Exp. Date: _____☐ cardiovascular exercise: ☐ running ☐ jogging ☐ walking ☐ softball Exp. Date: _____☐ football ☐ basketball ☐ handball ☐ stationary equipment☐ other: _____ Exp. Date: _____**May have the following equipment in his / her possession:**

Equipment	Start Date	End Date	Return Date
Alternate Institutional Shoes	06/16/2017	03/09/2022	

Work Restriction / Limitation:Cleared for Food Service: Yes☒ No Restrictions

Comments: N/A

Albu-Gardner, Nikki MLP

08/28/2018

Health Services Staff

Date

Inmate Name: MUNIZ, ROLANDO Reg #: 81986-280 Quarters: G08**ALL EXPIRATION DATES ARE AT 24:00**

**Bureau of Prisons
Health Services
Medication Summary
Historical**

Complex: OTV--OTISVILLE FCI	Begin Date: 01/01/2018	End Date: 01/01/2019
Inmate: MUNIZ, ROLANDO	Reg #: 81986-280	Quarter: G08-317L

Medications listed reflect prescribed medications from the begin date to end date on this report.

Allergies: Denied

Active Prescriptions

Acetaminophen 325 MG Tab

Take two tablets (650 MG) by mouth three times daily for 3 days

Rx#: 196986-MNA Doctor: ~~Albu~~-Gardner, Nikki MLP

Start: 09/25/18 Exp: 09/28/18 Pharmacy Dispensings: 18 TAB in 3 days

Atorvastatin 20 MG TAB

Take one tablet (20 MG) by mouth at bedtime

Rx#: 177887-YAX Doctor: Chambers, A. MD, CD

Start: 10/17/18 Exp: 11/16/18 Pharmacy Dispensings: 24 tab in 30 days

Atorvastatin 20 MG TAB

Take one tablet (20 MG) by mouth at bedtime

Rx#: 180720-YAX Doctor: Chambers, A. MD, CD

Start: 11/19/18 Exp: 12/19/18 D/C: 12/04/18 Pharmacy Dispensings: 30 tab in 30 days

Atorvastatin 20 MG TAB

Take one tablet (20 MG) by mouth at bedtime

Rx#: 181444-YAX Doctor: Newland, R. MD

Start: 12/04/18 Exp: 06/02/19 Pharmacy Dispensings: 168 tab in 180 days

Atorvastatin 10 MG Tab

Take one tablet (10 MG) by mouth each day

Rx#: 184443-MNA Doctor: Lopez, H. (MAT) MD/SER MAST PHYSICIAN

Start: 11/20/17 Exp: 05/19/18 D/C: 02/14/18 Pharmacy Dispensings: 90 tab in 180 days

Atorvastatin 20 MG TAB

note increased dose 2/14/18 - Take one tablet (20 MG) by mouth at bedtime

Rx#: 187784-MNA Doctor: Lopez, H. (MAT) MD/SER MAST PHYSICIAN

Start: 02/14/18 Exp: 02/14/19 D/C: 10/13/18 Pharmacy Dispensings: 255 tab in 365 days

carBAMazepine 200 MG Tab

Take one and one-half (1 and 1/2) tablets (300 MG) by mouth twice daily for pain

Rx#: 177985-YAX Doctor: Chambers, A. MD, CD

Start: 10/17/18 Exp: 11/16/18 Pharmacy Dispensings: 72 TAB in 30 days

Inmate Name: MUNIZ, ROLANDO

Date of Birth: 08/24/1980

Sex: M

Reg #: 81986-280

Race: WHITE

Encounter Date: 10/16/2018 17:19

Provider: Nordstrom, Justin RN

Facility: YAP

Renew Medication Orders:

<u>Rx#</u>	<u>Medication</u>	<u>Order Date</u>	<u>Prescriber Order</u>
187786-MNA	Lisinopril 10 MG Tab	10/16/2018 17:19	Take one tablet (10 MG) by mouth each day x 30 day(s)
Indication: Diabetes, type II w/oth spec manifestation, uncont			
187787-MNA	metFORMIN 1000 MG Tab	10/16/2018 17:19	Take one tablet (1000 MG) by mouth two times a day x 30 day(s)
Indication: Diabetes, type II w/oth spec manifestation, uncont			

Reconciled Medications:

<u>Source</u>	<u>Action</u>	<u>Type</u>	<u>Rx#</u>	<u>Medication</u>	<u>Order Detail</u>
BOP	Continue	Rx	187784-MNA	Atorvastatin 20 MG TAB	***note increased dose*** 2/14/18 - Take one tablet (20 MG) by mouth at bedtime
BOP	Continue	Rx	194786-MNA	carBAMazepine 200 MG Tab	Take one and one-half (1 and 1/2) tablets (300 MG) by mouth twice daily for pain
BOP	Continue	Rx	196093-MNA	Finasteride 5 MG TAB	Take one tablet (5 MG) by mouth each day
BOP	Continue	Rx	187786-MNA	Lisinopril 10 MG Tab	Take one tablet (10 MG) by mouth each day
BOP	Continue	Rx	187787-MNA	metFORMIN 1000 MG Tab	Take one tablet (1000 MG) by mouth two times a day
		OTC		No known OTCs	

Instructed inmate how to obtain medical, dental, and mental health care.

Copay Required: No

Cosign Required: Yes

Telephone/Verbal Order: Yes By: Chambers, A. MD, CD

Telephone or Verbal order read back and verified.

Completed by Nordstrom, Justin RN on 10/16/2018 17:21

Requested to be cosigned by Chambers, A. MD, CD.

Cosign documentation will be displayed on the following page.

Bureau of Prisons

Health Services

Cosign/Review

Inmate Name: MUNIZ, ROLANDO

Date of Birth: 08/24/1980

Encounter Date: 10/16/2018 17:19

Sex: M

Provider: Nordstrom, Justin RN

Reg #: 81986-280

Race: WHITE

Facility: YAP

Cosigned with New Encounter Note by Chambers, A. MD, CD on 10/16/2018 18:33.

Inmate Name: MUNIZ, ROLANDO	Reg #: 81986-280
Date of Birth: 08/24/1980	Race: WHITE
Encounter Date: 10/16/2018 17:19	Facility: YAP
Sex: M	
Provider: Nordstrom, Justin RN	

Renew Medication Orders:

<u>Rx#</u>	<u>Medication</u>	<u>Order Date</u>	<u>Prescriber Order</u>
187786-MNA	Lisinopril 10 MG Tab	10/16/2018 17:19	Take one tablet (10 MG) by mouth each day x 30 day(s)
Indication: Diabetes, type II w/oth spec manifestation, uncont			
187787-MNA	metFORMIN 1000 MG Tab	10/16/2018 17:19	Take one tablet (1000 MG) by mouth two times a day x 30 day(s)

Indication: Diabetes, type II w/oth spec manifestation, uncont**Reconciled Medications:**

<u>Source</u>	<u>Action</u>	<u>Type</u>	<u>Rx#</u>	<u>Medication</u>	<u>Order Detail</u>
BOP	Continue	Rx	187784-MNA	Atorvastatin 20 MG TAB	***note increased dose*** 2/14/18 - Take one tablet (20 MG) by mouth at bedtime
BOP	Continue	Rx	194786-MNA	carBAMazepine 200 MG Tab	Take one and one-half (1 and 1/2) tablets (300 MG) by mouth twice daily for pain
BOP	Continue	Rx	196093-MNA	Finasteride 5 MG TAB	Take one tablet (5 MG) by mouth each day
BOP	Continue	Rx	187786-MNA	Lisinopril 10 MG Tab	Take one tablet (10 MG) by mouth each day
BOP	Continue	Rx	187787-MNA	metFORMIN 1000 MG Tab	Take one tablet (1000 MG) by mouth two times a day
		OTC		No known OTCs	

Instructed inmate how to obtain medical, dental, and mental health care.

Copay Required: No Cosign Required: Yes
 Telephone/Verbal Order: Yes By: Chambers, A. MD, CD
 Telephone or Verbal order read back and verified.

Completed by Nordstrom, Justin RN on 10/16/2018 17:21
 Requested to be cosigned by Chambers, A. MD, CD.
 Cosign documentation will be displayed on the following page.

**Bureau of Prisons
Health Services
Cosign/Review**

Inmate Name:	MUNIZ, ROLANDO	Reg #:	81986-280
Date of Birth:	08/24/1980	Sex:	M
Encounter Date:	10/16/2018 17:19	Provider:	Nordstrom, Justin RN
		Race:	WHITE
		Facility:	YAP

Cosigned with New Encounter Note by Chambers, A. MD, CD on 10/16/2018 18:33.

Bureau of Prisons
Health Services
Clinical Encounter - Administrative Note

Inmate Name: MUNIZ, ROLANDO		Reg #: 81986-280
Date of Birth: 08/24/1980	Sex: M Race: WHITE	Facility: YAP
Note Date: 11/16/2018 16:15	Provider: Scott, N. RN	Unit: Z04

Admin Note - Orders encounter performed at Health Services.

Administrative Notes:

ADMINISTRATIVE NOTE 1 **Provider: Scott, N. RN**
Medication refill

Renew Medication Orders:

<u>Rx#</u>	<u>Medication</u>	<u>Order Date</u>	<u>Prescriber Order</u>
177985-YAX	carBAMazepine 200 MG Tab	11/16/2018 16:15	Take one and one-half (1 and 1/2) tablets (300 MG) by mouth twice daily for pain x 30 day(s)
	Indication: Diabetes, type II w/oth spec manifestation, uncont, Polyneuropathy, unspecified		
177887-YAX	Atorvastatin 20 MG TAB	11/16/2018 16:15	Take one tablet (20 MG) by mouth at bedtime x 30 day(s)
	Indication: Hyperlipidemia, mixed		
177884-YAX	Finasteride 5 MG TAB	11/16/2018 16:15	Take one tablet (5 MG) by mouth each day x 30 day(s)
	Indication: Enlarged prostate without lower urinary tract symptoms (BPH)		
177885-YAX	Lisinopril 10 MG Tab	11/16/2018 16:15	Take one tablet (10 MG) by mouth each day x 30 day(s)
	Indication: Diabetes, type II w/oth spec manifestation, uncont		
177886-YAX	metFORMIN 1000 MG Tab	11/16/2018 16:15	Take one tablet (1000 MG) by mouth two times a day x 30 day(s)
	Indication: Diabetes, type II w/oth spec manifestation, uncont		

Copay Required: No **Cosign Required:** Yes
Telephone/Verbal Order: Yes **By:** Chambers, A. MD, CD
Telephone or Verbal order read back and verified.

Completed by Scott, N. RN on 11/16/2018 16:18
Requested to be cosigned by Chambers, A. MD, CD.
Cosign documentation will be displayed on the following page.
Requested to be reviewed by Newland, R. MD.
Review documentation will be displayed on the following page.

Bureau of Prisons
Health Services
Cosign/Review

Inmate Name:	MUNIZ, ROLANDO	Reg #:	81986-280
Date of Birth:	08/24/1980	Sex:	M
Encounter Date:	11/16/2018 16:15	Provider:	Scott, N. RN
		Race:	WHITE
		Facility:	YAP

Cosigned by Chambers, A. MD, CD on 11/18/2018 18:00.

**Bureau of Prisons
Health Services
Medication Summary
Historical**

Complex: FAI--FAIRTON FCI	Begin Date: 11/29/2018	End Date: 11/29/2019
Inmate: MUNIZ, ROLANDO	Reg #: 81986-280	Quarter: B04-408U

Medications listed reflect prescribed medications from the begin date to end date on this report.

Allergies: Denied

Active Prescriptions

Acetaminophen 325 MG Tab

Take two tablets (650 MG) by mouth three times daily as needed for pain for 5 days - 3 day supply issued from NIGHT STOCK

Rx#: 138104-FAI **Doctor:** McGann, S. MD/CD

Start: 11/22/19 **Exp:** 11/24/19

Pharmacy Dispensings: 12 TAB in 8 days

Alfuzosin 10 mg Tablet Extended Release 24 Hou

Take one tablet (10 MG) by mouth daily ***non-formulary approved*** 10/05/2019

Rx#: 136390-FAI **Doctor:** Lopez de Lasalle, Abigail MD

Start: 09/05/19 **Exp:** 10/05/19

Pharmacy Dispensings: 24 TAB in 86 days

Amoxicillin 500 MG Cap

Take one capsule (500 MG) by mouth three times daily for 5 days ***It is important to finish ALL of this medication*** - 3 day supply issued from NIGHT STOCK

Rx#: 138107-FAI **Doctor:** McGann, S. MD/CD

Start: 11/23/19 **Exp:** 11/25/19

Pharmacy Dispensings: 6 CAP in 7 days

Atorvastatin 20 MG TAB

Take one tablet (20 MG) by mouth at bedtime

Rx#: 135084-FAI **Doctor:** Limbekar, Satish MLP

Start: 07/09/19 **Exp:** 08/08/19 **D/C:** 07/11/19

Pharmacy Dispensings: 0 tab in 144 days

Atorvastatin 20 MG TAB

Take one tablet (20 MG) by mouth at bedtime

Rx#: 135187-FAI **Doctor:** Lopez de Lasalle, Abigail MD

Start: 07/11/19 **Exp:** 07/10/20 **D/C:** 11/25/19

Pharmacy Dispensings: 150 tab in 142 days

Atorvastatin 20 MG TAB

Take one tablet (20 MG) by mouth at bedtime

Rx#: 135193-FAI **Doctor:** Lopez de Lasalle, Abigail MD

Start: 07/11/19 **Exp:** 07/10/20 **D/C:** 07/11/19

Pharmacy Dispensings: 30 tab in 142 days

Atorvastatin 20 MG TAB

Take one tablet (20 MG) by mouth at bedtime

Rx#: 138103-FAI **Doctor:** McGann, S. MD/CD

Start: 11/25/19 **Exp:** 11/24/20

Pharmacy Dispensings: 30 tab in 5 days

**Bureau of Prisons
Health Services
Medical Duty Status**

Reg #: 81986-280

Inmate Name: MUNIZ, ROLANDO

Housing Status

☐ confined to the living quarters except ☐ meals ☐ pill line ☐ treatments Exp. Date: _____
☐ on complete bed rest: ☐ bathroom privileges only Exp. Date: _____
☒ cell: ☐ cell on first floor ☐ single cell ☒ lower bunk ☐ airborne infection isolation Exp. Date: 11/01/2020
☒ other: Diabetic Pill Line Exp. Date: 08/28/2020

Physical Limitations/Restrictions

☐ all sports Exp. Date: _____
☐ weightlifting: ☐ upper body ☐ lower body Exp. Date: _____
☐ cardiovascular exercise: ☐ running ☐ jogging ☐ walking ☐ softball Exp. Date: _____
☐ football ☐ basketball ☐ handball ☐ stationary equipment
☐ other: _____ Exp. Date: _____

May have the following equipment in his/her possession:

Equipment	Start Date	End Date	Return Date
Alternate Institutional Shoes	06/16/2017	11/01/2020	

Work Restriction / Limitation

Cleared for Food Service: Yes
☒ No Restrictions

Comments: N/A

Alexander, M ARNP

01/29/2019

Health Services Staff

Date

Inmate Name: MUNIZ, ROLANDO Reg #: 81986-280 Quarters: B04**ALL EXPIRATION DATES ARE AT 24:00**

Inmate Name: MUNIZ, ROLANDO
 Date of Birth: 08/24/1980
 Encounter Date: 12/03/2018 13:55

Sex: M Race: WHITE
 Provider: Newland, R. MD

Reg #: 81986-280
 Facility: YAP
 Unit: Z04

Exam:

Yes: Within Normal Limits

Genitourinary**General**

Yes: Within Normal Limits

Musculoskeletal**Ankle/Foot/Toes**

Yes: Normal Exam, Full Range of Motion, Non-tender on Palpation, Normal Bony Landmarks, Symmetric, Normal Active ROM, Normal Passive ROM, Neurovascular Intact

No: Muscle Spasm, Muscle Atrophy, Edema, Pitting Edema, Swelling, Inflammation

Neurologic**Cranial Nerves (CN)**

Yes: Within Normal Limits, CN 2-12 Intact Grossly

Exam comments

on 09/06/2018

USG mildly prominent prostate

Feet Monofilament Test Sensation of the Feet Intact

ASSESSMENT:

Diabetes, type II w/oth spec manifestation, uncont, 250.82 - Current

Hyperlipidemia, mixed, 272.2 - Current

Enlarged prostate without lower urinary tract symptoms (BPH), N400 - Current

PLAN:**New Medication Orders:**

<u>Rx#</u>	<u>Medication</u>	<u>Order Date</u>	<u>Prescriber Order</u>
	Tamsulosin Capsule	12/03/2018 13:55	0.4 mg Orally Mouth at bedtime x 180 day(s)
Indication: Enlarged prostate without lower urinary tract symptoms (BPH)			

Renew Medication Orders:

<u>Rx#</u>	<u>Medication</u>	<u>Order Date</u>	<u>Prescriber Order</u>
180720-YAX	Atorvastatin 20 MG TAB	12/03/2018 13:55	Take one tablet (20 MG) by mouth at bedtime x 180 day(s)
Indication: Hyperlipidemia, mixed			
180721-YAX	carBAMazepine 200 MG Tab	12/03/2018 13:55	Take one and one-half (1 and 1/2) tablets (300 MG) by mouth twice daily for pain x 180 day(s)
Indication: Diabetes, type II w/oth spec manifestation, uncont, Polyneuropathy, unspecified			
180723-YAX	Lisinopril 10 MG Tab	12/03/2018 13:55	Take one tablet (10 MG) by mouth each day x 180 day(s)
Indication: Diabetes, type II w/oth spec manifestation, uncont			
180724-YAX	metFORMIN 1000 MG Tab	12/03/2018 13:55	Take one tablet (1000 MG) by mouth two times a day x 180 day(s)
Indication: Diabetes, type II w/oth spec manifestation, uncont			

Discontinued Medication Orders:

<u>Rx#</u>	<u>Medication</u>	<u>Order Date</u>	<u>Prescriber Order</u>
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Inmate Name: MUNIZ, ROLANDO

Date of Birth: 08/24/1980

Sex: M Race: WHITE

Reg #: 81986-280

Encounter Date: 12/03/2018 13:55

Provider: Newland, R. MD

Facility: YAP

Unit: Z04

Discontinued Medication Orders:

<u>Rx#</u>	<u>Medication</u>	<u>Order Date</u>	<u>Prescriber Order</u>
180722-YAX	Finasteride 5 MG TAB	12/03/2018 13:55	Take one tablet (5 MG) by mouth each day

Discontinue Type: ~~When Pharmacy Processes~~**Discontinue Reason:** *discontinue***Indication:****New Laboratory Requests:**

<u>Details</u>	<u>Frequency</u>	<u>Due Date</u>	<u>Priority</u>
Chronic Care Clinics-Diabetic-CBC w/diff	One Time	05/22/2019 00:00	Routine
Chronic Care Clinics-Diabetic-Lipid Profile			
Chronic Care Clinics-Diabetic-TSH			
Chronic Care Clinics-Diabetic-Hemoglobin A1C			
Lab Tests-C-Carbamazepine			
Chronic Care Clinics-Diabetic-Comprehensive Metabolic Profile (CMP)			

Schedule:

<u>Activity</u>	<u>Date Scheduled</u>	<u>Scheduled Provider</u>
Clinical Encounter	06/12/2019 00:00	Physician 03

Disposition:

Follow-up at Sick Call as Needed
 Follow-up at Chronic Care Clinic as Needed
 To be Evaluated by Provider

Other:

- Educated on life style modification diet/exercise
- Insisted on medication compliance
- Request for lower bunk denied
- Lab ordered
- F/U CCC in 180 days wit MD3
- S/C PRN

Patient Education Topics:

<u>Date Initiated</u>	<u>Format</u>	<u>Handout/Topic</u>	<u>Provider</u>	<u>Outcome</u>
12/03/2018	Counseling	Access to Care	Newland, R.	Verbalizes Understanding

Copay Required: No

Cosign Required: No

Telephone/Verbal Order: No

Completed by Newland, R. MD on 12/03/2018 14:20

EXHIBIT-2

Inmate Name: MUNIZ, ROLANDO
 Date of Birth: 08/24/1980
 Encounter Date: 07/10/2019 13:18

Sex: M Race: WHITE
 Provider: Lopez de Lasalle, Abigail

Reg #: 81986-280
 Facility: FAI
 Unit: B04

New Medication Orders:

only gave methyldopa two medications

Rx#	Medication	Order Date	Prescriber Order
	Tamsulosin HCl Capsule	07/10/2019 13:18	0.8 mg Orally at bedtime x 365 day(s)
Indication: Enlarged prostate without lower urinary tract symptoms (BPH)			

Renew Medication Orders:

Rx#	Medication	Order Date	Prescriber Order
135084-FAI	Atorvastatin 20 MG TAB	07/10/2019 13:18	Take one tablet (20 MG) by mouth at bedtime x 365 day(s)
Indication: Hyperlipidemia, mixed			

Discontinued Medication Orders:

Rx#	Medication	Order Date	Prescriber Order
	Lisinopril 10 MG Tab	07/10/2019 13:18	Take one tablet (10 MG) by mouth each day x 365 day(s)

Discontinue Type: When Pharmacy Processes

Discontinue Reason: Not Indicated

Indication:

metFORMIN 500 MG Tab

07/10/2019 13:18

Take one tablet (500 MG) by mouth twice daily x 365 day(s)

Discontinue Type: When Pharmacy Processes

Discontinue Reason: Not Indicated

Indication:

Tamsulosin HCl 0.4 MG Cap

07/10/2019 13:18

Take one capsule (0.4 MG) by mouth at bedtime x 365 day(s)

Discontinue Type: When Pharmacy Processes

Discontinue Reason: new order written

Indication:

New Laboratory Requests:

Details	Frequency	Due Date	Priority
Chronic Care Clinics-Diabetic-CBC w/diff	One Time	11/12/2019 00:00	Routine
Chronic Care Clinics-Diabetic-Lipid Profile			
Chronic Care Clinics-Diabetic-TSH			
Chronic Care Clinics-Diabetic-Hemoglobin A1C			
Chronic Care Clinics-Diabetic-Microalbumin & Creatinine, Urine Random			
Chronic Care Clinics-Diabetic-Comprehensive Metabolic Profile (CMP)			
Chronic Care Clinics-Diabetic-Urinalysis w/Reflex to Microscopic			
Chronic Care Clinics-Diabetic-CBC w/diff	One Time	04/07/2020 00:00	Routine
Chronic Care Clinics-Diabetic-Lipid Profile			
Chronic Care Clinics-Diabetic-Hemoglobin A1C			
Lab Tests - Short List-General-PSA, Total			
Chronic Care Clinics-Diabetic-Microalbumin & Creatinine, Urine Random			
Chronic Care Clinics-Diabetic-Comprehensive Metabolic Profile (CMP)			

Schedule:

Activity	Date Scheduled	Scheduled Provider
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EXHIBIT-3**SJUC - Main Office**

2950 College Drive Suite 2E
 Vineland, NJ 08360
 Phone: (856) 405-0025
 Fax: (856) 462-6314

Rolando Muniz **81986-280**
Date of Encounter: 11/06/2019 08:05 AM

Patient #: 93160**DOB: 08/24/1980 (39 years)****History of Present Illness**

Christopher Sang Don Lee, MD FACS 11/06/2019 08:06 AM

The patient is a 39 year old male who presents for a cystoscopy.

Additional reasons for visit:

Recheck of Enlarged prostate is described as the following:

Note for "Enlarged prostate": In office for BHP, Has to strain in order to urinate with a thin stream, tries to urinating about 8x per day. Urinating 2 or 3x per night. No dysuria. No groin or testicle pain. No flank pain

History

Christopher Sang Don Lee, MD FACS 11/06/2019 08:06 AM

Allergy

No Known Allergies (08/30/2019)

No Known Drug Allergies (08/30/2019)

Past Medical

Diabetes (250.00 | E11.9) ; Does not take medicine

High cholesterol (272.0 | E78.00)

Other Medical History

Urinary frequency (788.41 | R35.0)

Split, urinary stream (788.61 | R39.13)

Nocturia (788.43 | R35.1)

Incomplete bladder emptying (788.21 | R33.9)

Epididymal cyst (608.89 | N50.3)

Inguinal hernia, right (550.90 | K40.90)

Medications

Uroxatral (10MG Tablet ER 24HR 1 (one) Tablet ER 24HR Oral daily, Taken starting 08/30/2019) Active - Hx Entry.
 (take at dinner or bedtime)

Family

Mother : Deceased Not Sure

Father : Deceased Diabetes

Past Surgical

None (08/30/2019)

Rolando Muniz **81986-280**
 Friday, November 8, 2019

Patient #: 93160**DOB: 08/24/1980 (39 years)**

Page 1 / 3

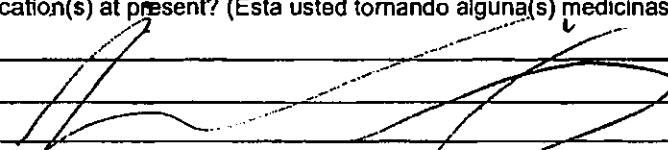
FCI FAIRTON
INMATE SICK CALL SIGN-UP SHEET
 (Formulario y Registro para Atencion Medica de Confinados)

Staff member will complete this section if inmate is unable to read or write.

INSTRUCTIONS (Instrucciones)

You must fill out this form completely, numbers 1-11.

(Debe de llenar este formulario completamente, numeros 1-11.)

1. Date (Fecha) 11-5-19 2. Unit (Unidad) B-R 3. Work (Trabajo) Kitchen
4. Name (Nombre) Rolando Muniz
5. Register Number (Numero de Registro) 81986280
6. Complaint (Queja), What is your problem? (Cual es su problema?)
im a ~~Diabetic~~ Diabetic and I have a open
sore on ~~foot~~ toe with discharge drainage.
7. History or medical problems: (Historial de problemas medicos:)
 - ☒ Diabetes (diabetes)
 - ☐ Hypertension (hipertension)
 - ☐ Cardiac disease (enfermedad cardiac)
 - ☐ Immunocompromised (Inmunocomprometido)
 - ☐ Asthma (asma)
8. History of mental health problems? (Historial de problemas mentales?)
 - ☐ Yes (si)
 - ☒ No (no)
9. How long have you had this problem? (Durante cuanto tiempo ha tenido este problema?)
 Days (Dias) 1 week Months (Meses) _____ Years (Anos) _____
10. Are you on any medication(s) at present? (Esta usted tomando alguna(s) medicinas actualmente?)
NO
11. Signature (Firma) 

TO BE FILLED OUT BY TRIAGE PERSONAL:

12. Date Seen: _____ 13. Time Seen: _____
14. Subjective: _____
15. Objective: Temperature: _____ Pulse: _____ Respiration: _____ B/P: _____
 If diabetic, blood sugar via fingerstick: _____ Weight: _____
16. Notes: _____
17. Appointment Date: 11/7/19 Appointment Time: _____ **KNOWLES, K.**
18. Appointment with (Provider's Name) Kyle Knowles PA-C **PA-C**
19. Triage personnel's signature: Kyle Knowles PA-C **FCI FAIRTON**

07-11-19 PM03:07

Bureau of Prisons
Health Services
Clinical Encounter

Inmate Name: MUNIZ, ROLANDO
 Date of Birth: 08/24/1980
 Encounter Date: 11/07/2019 16:11

Sex: M Race: WHITE
 Provider: Knowles, Kyle PA-C

Reg #: 81986-280
 Facility: FAI
 Unit: B04

Mid Level Provider - Sick Call Note encounter performed at Health Services.

SUBJECTIVE:

COMPLAINT 1 **Provider:** Knowles, Kyle PA-C

Chief Complaint: Skin Problem

Subjective: 39 year old male patient, with PMH of type 2 diabetes, presents c/o an open wound to his left foot x 2 weeks. Patient states open wound located on top of second toe of right foot. Denies injury/trauma and states he is not sure what caused this to develop. Patient admits aching pain, rated as 5/10. Denies palliative or provocative factors. He admits clear-yellow discharge. Admits to swelling in his toe. Denies fever/chills.

Pain: Yes

Pain Assessment

Date: 11/07/2019 16:14

Location: Toe(s)-Left

Quality of Pain: Aching

Pain Scale: 5

Intervention: medical evaluation

Trauma Date/Year:

Injury:

Mechanism:

Onset: 1-2 Weeks

Duration: 1-2 Weeks

Exacerbating Factors: none

Relieving Factors: none

Reason Not Done:

Comments:

OBJECTIVE:

Temperature:

<u>Date</u>	<u>Time</u>	<u>Fahrenheit</u>	<u>Celsius</u>	<u>Location</u>	<u>Provider</u>
11/07/2019	16:11 FAI	98.2	36.8	Oral	Knowles, Kyle PA-C

Pulse:

<u>Date</u>	<u>Time</u>	<u>Rate Per Minute</u>	<u>Location</u>	<u>Rhythm</u>	<u>Provider</u>
11/07/2019	16:11 FAI	87	Via Machine	Regular	Knowles, Kyle PA-C

Respirations:

<u>Date</u>	<u>Time</u>	<u>Rate Per Minute</u>	<u>Provider</u>
11/07/2019	16:11 FAI	18	Knowles, Kyle PA-C

Blood Pressure:

<u>Date</u>	<u>Time</u>	<u>Value</u>	<u>Location</u>	<u>Position</u>	<u>Cuff Size</u>	<u>Provider</u>
11/07/2019	16:11 FAI	121/65	Left Arm	Sitting	Adult-large	Knowles, Kyle PA-C

SaO2:

Bureau of Prisons

Health Services

Cosign/Review

Inmate Name: MUNIZ, ROLANDO

Date of Birth: 08/24/1980

Encounter Date: 11/10/2019 13:12

Sex: M

Provider: Knowles, Kyle PA-C

Reg #: 81986-280

Race: WHITE

Facility: FAI

Cosigned by McGann, S. MD/CD on 11/12/2019 12:05.

Bureau of Prisons
Health Services
Clinical Encounter - Administrative Note

Inmate Name:	MUNIZ, ROLANDO	Reg #:	81986-280
Date of Birth:	08/24/1980	Sex:	M Race: WHITE
Note Date:	11/16/2019 12:10	Provider:	Nguyen, Thang RN
		Facility:	FAI
		Unit:	B04

Admin Note - General Administrative Note encounter performed at Health Services.

Administrative Notes:

ADMINISTRATIVE NOTE 1 **Provider:** Nguyen, Thang RN

Called for inmate for wound care. Inmate was found in housing unit but did not show for wound care.

Copay Required: No **Cosign Required:** Yes

Telephone/Verbal Order: No

Completed by Nguyen, Thang RN on 11/16/2019 12:12

Requested to be cosigned by Lopez de Lasalle, Abigail MD.

Cosign documentation will be displayed on the following page.

Requested to be reviewed by Knowles, Kyle PA-C.

Review documentation will be displayed on the following page.

**Bureau of Prisons
Health Services
Cosign/Review**

Inmate Name:	MUNIZ, ROLANDO	Reg #:	81986-280
Date of Birth:	08/24/1980	Sex:	M
Encounter Date:	11/16/2019 12:10	Provider:	Nguyen, Thang RN
		Race:	WHITE
		Facility:	FAI

Reviewed by Knowles, Kyle PA-C on 11/18/2019 08:10.

FAI/Medical Records~ - 0a574872-37ad-4057-b5b6-c7e57f259455

From: FAI/InmateToHealthSvcs
To: ~^!MUNIZ, ~^!ROLANDO
Date: 11/18/2019 11:22 AM
Subject: 0a574872-37ad-4057-b5b6-c7e57f259455

You were evaluated yesterday

>>> ~^!"MUNIZ, ~^!ROLANDO" <81986280@inmatemessage.com> 11/16/2019 3:15 PM >>>

To: knowles

Inmate Work Assignment: kitchen

ATTENTION

Please cut and paste the message indicator below into the subject line; only this indicator can be in the subject line.

0a574872-37ad-4057-b5b6-c7e57f259455

Your response must come from the departmental mail box. Responses from personal mailboxes WILL NOT be delivered to the inmate.

Inmate Message Below

hey i was checking my toe and the hole is getting smaller but the swelling is getting bigger plus looks like lose skin like if it has puss in there

FAI/Medical Records~ - 6abb454f-dd99-4490-bcb3-2da080c70089

From: FAI/InmateToHealthSvcs
To: ~^!MUNIZ, ~^!ROLANDO
Date: 11/15/2019 8:00 AM
Subject: 6abb454f-dd99-4490-bcb3-2da080c70089

You are scheduled to return to urology within the next 60 days.

>>> ~^!"MUNIZ, ~^!ROLANDO <81986280@inmatemessage.com> 11/13/2019 1:33 PM >>>
To: dr.lopez
Inmate Work Assignment: kitchen

ATTENTION

Please cut and paste the message indicator below into the subject line; only this indicator can be in the subject line.

6abb454f-dd99-4490-bcb3-2da080c70089

Your response must come from the departmental mail box. Responses from personal mailboxes WILL NOT be delivered to the inmate.

Inmate Message Below

when i went to the urologist he said i needed to go back do you know whats going on with the follow up on that i really need this done thank you

Inmate Name: MUNIZ, ROLANDO

Date of Birth: 08/24/1980

Encounter Date: 11/18/2019 12:35

Sex: M Race: WHITE

Provider: Murphy, Brian RN, HSA

Reg #: 81986-280

Facility: FAI

Unit: B04

Date	Time	Value	Location	Position	Cuff Size	Provider
11/18/2019	12:59 FAI	99/63	Left Arm	Sitting	Adult-regular	Murphy, Brian RN, HSA

SaO2:

Date	Time	Value(%)	Air	Provider
11/18/2019	12:59 FAI	100	Room Air	Murphy, Brian RN, HSA

Exam:**General****Affect**

Yes: Pleasant

Appearance

Yes: Appears Well, Alert and Oriented x 3

Skin**Wound**

Yes: Signs and/or Symptoms of Infection, Macerated Tissue, Drainage, Serous Drainage, Small amount of drainage, Pain

ROS Comments

Pt presents for wound care to left 2nd toe. Reports daily wound care and compliance with antibiotics. Reports toe ulcer improving, but reports deterioration of lateral and distal aspect of his toe with swelling and drainage.

Exam Comments

Inmate presents for wound care with old dressing to left 2nd toe intact. Old drsg noted to have moderate amount of serosanguinous drainage. Left 2nd toe noted to have a 1/2 inch diameter wound to the superior aspect of the toe. Wound edges pale and white. Wound bed pink with good granulation tissue. Medial aspect of the 2nd toe with noted skin breakdown. Serous drainage noted to the distal aspect of the toe along with macerated skin and swelling.

ASSESSMENT:

Infection - Skin; Signs of

left 2nd toe cellulitis. Discussed case with MO and will refer to local ER for further evaluation.

PLAN:**New Consultation Requests:**

Consultation/Procedure	Target Date	Scheduled Target Date	Priority	Translator	Language
Emergency Room	11/18/2019	11/18/2019	Urgent	No	

Subtype:

SOUTH JERSEY ER

Reason for Request:

evaluate left 2nd toe infection

Provisional Diagnosis:

Left 2nd toe cellulitis.

Disposition:

Transfer to Local Hospital

Patient Education Topics:

Date Initiated	Format	Handout/Topic	Provider	Outcome
11/18/2019	Counseling	Plan of Care	Murphy, Brian	Verbalizes Understanding

Inmate Name: MUNIZ, ROLANDO

Date of Birth: 08/24/1980

Encounter Date: 11/18/2019 12:35

Sex: M Race: WHITE

Provider: Murphy, Brian RN, HSA

Reg #: 81986-280

Facility: FAI

Unit: B04

Copay Required: No

Cosign Required: Yes

Telephone/Verbal Order: Yes **By:** McGann, S. MD/CD

Telephone or Verbal order read back and verified.

Completed by Murphy, Brian RN, HSA on 11/18/2019 13:01

Requested to be cosigned by McGann, S. MD/CD.

Cosign documentation will be displayed on the following page.

**Bureau of Prisons
Health Services
Clinical Encounter**

Inmate Name: MUNIZ, ROLANDO	Sex: M Race: WHITE	Reg #: 81986-280
Date of Birth: 08/24/1980	Provider: Murphy, Brian RN, HSA	Facility: FAI
Encounter Date: 11/18/2019 12:35		Unit: B04

Nursing - Wound Care encounter performed at Health Services.

SUBJECTIVE:

COMPLAINT 1 **Provider:** Murphy, Brian RN, HSA

Chief Complaint: Open Wound(s)

Subjective: Inmate resents for wound care to left 2nd toe.

Pain: Yes

Pain Assessment

Date: 11/18/2019 12:35

Location: Toe(s)-Left

Quality of Pain: Aching

Pain Scale: 3

Intervention: outside trip

Trauma Date/Year:

Injury:

Mechanism:

Onset: 1-2 Weeks

Duration: 1-2 Weeks

Exacerbating Factors: pressure and movement

Relieving Factors: nothing

Reason Not Done:

Comments:

ROS:

Integumentary

Skin

Yes: Sores that won't heal

No: Within Normal Limits

OBJECTIVE:

Temperature:

<u>Date</u>	<u>Time</u>	<u>Fahrenheit</u>	<u>Celsius</u>	<u>Location</u>	<u>Provider</u>
11/18/2019	12:59 FAI	97.4	36.3	Oral	Murphy, Brian RN, HSA

Pulse:

<u>Date</u>	<u>Time</u>	<u>Rate Per Minute</u>	<u>Location</u>	<u>Rhythm</u>	<u>Provider</u>
11/18/2019	12:59 FAI	98	Via Machine		Murphy, Brian RN, HSA

Respirations:

<u>Date</u>	<u>Time</u>	<u>Rate Per Minute</u>	<u>Provider</u>
11/18/2019	12:59 FAI	16	Murphy, Brian RN, HSA

Blood Pressure:

<u>Date</u>	<u>Time</u>	<u>Value</u>	<u>Location</u>	<u>Position</u>	<u>Cuff Size</u>	<u>Provider</u>
-------------	-------------	--------------	-----------------	-----------------	------------------	-----------------

Inmate Name: MUNIZ, ROLANDO

Reg #: 81986-280

Date of Birth: 08/24/1980

Sex: M Race: WHITE

Facility: FAI

Encounter Date: 11/18/2019 13:17

Provider: McGann, S. MD/CD

Unit: B04

patient was sent to the outside hospital for further evaluation.

Patient Education Topics:

<u>Date Initiated</u>	<u>Format</u>	<u>Handout/Topic</u>	<u>Provider</u>	<u>Outcome</u>
11/18/2019	Counseling	Plan of Care	McGann, S.	Verbalizes Understanding

Copay Required: No**Cosign Required:** No**Telephone/Verbal Order:** No

Completed by McGann, S. MD/CD on 11/18/2019 13:20

Bureau of Prisons

Health Services

Clinical Encounter - Administrative Note

Inmate Name: MUNIZ, ROLANDO

Date of Birth: 08/24/1980

Note Date: 11/21/2019 13:35

Sex: M Race: WHITE

Provider: McGann, S. MD/CD

Reg #: 81986-280

Facility: FAI

Unit: B04

Admin Note - Community Hospital Report encounter performed at Health Services.

Administrative Notes:

ADMINISTRATIVE NOTE 1

Provider: McGann, S. MD/CD

The patient went to the OR yesterday and had amputation of the left second toe. He continue to be on Cefepime.

Copay Required: No

Cosign Required: No

Telephone/Verbal Order: No

Completed by McGann, S. MD/CD on 11/21/2019 13:41

**Bureau of Prisons
Health Services**

Clinical Encounter - Administrative Note

Inmate Name:	MUNIZ, ROLANDO	Reg #:	81986-280
Date of Birth:	08/24/1980	Sex:	M
		Race:	WHITE
Note Date:	11/20/2019 15:43	Facility:	FAI
		Unit:	B04
		Provider:	McGann, S. MD/CD

Admin Note - Community Hospital Report encounter performed at Health Services.

Administrative Notes:

ADMINISTRATIVE NOTE 1 **Provider:** McGann, S. MD/CD

The patient went to the OR for debridement.

Copay Required: No

Cosign Required: No

Telephone/Verbal Order: No

Completed by McGann, S. MD/CD on 11/20/2019 15:47

11/25/2019 3:09:59 PM -0500 FAXCOM

Muniz, Rolando

Inspira Medical Center Vineland

Patient Name: F81986280, FEDERAL

MRN: 900582366

Admit: 11/18/2019

FIN: 0079109963

Disch: 11/22/2019

DOB/Age/Sex: 8/24/1980 39 years Male

Admitting: Struby, DO, Christopher

Emergency Documentation**Prescriptions:****Allergies: No Known Allergies****Medication Information:**

Inspira Medical Center Vineland ED Physicians provided you with a complete list of medications post discharge. If you have been instructed to stop taking a medication, please ensure you also follow up with this information to your Primary Care Physician. Unless otherwise noted, please continue to take medications as prescribed prior to your Emergency Room visit. Any specific questions regarding your chronic medications and dosages should be discussed with your physician(s) and pharmacist.

Medications That Have Not Changed**Other Medications**

atorvastatin (atorvastatin 20 mg oral tablet) 1 tab Oral (given by mouth) every day.

Last Dose: _____ Next Dose: _____

sulfamethoxazole-trimethoprim (sulfamethoxazole-trimethoprim 800 mg-160 mg oral tablet)

Last Dose: _____ Next Dose: _____

Major Tests:

The following tests were performed during your ED visit.

Cardiology Orders

No cardiology orders were placed.

Laboratory or Other Results This Visit (last charted value for your 11/18/2019 visit)**Hematology**

11/18/2019 5:21 PM

WBC: $9.5 \times 10^3/\mu\text{L}$ -- Normal range between (4.0 and 11.0)RBC: $4.39 \times 10^6/\mu\text{L}$ -- Normal range between (3.80 and 5.70)

Neutro Auto: 67.8 % -- Normal range between (40.0 and 74.0)

Lymph Auto: 21.5 % -- Normal range between (19.0 and 48.0)

Mono Auto: 7.4 % -- Normal range between (3.0 and 9.0)

Basophil Auto: 0.8 % -- Normal range between (0.0 and 1.0)

Baso Absolute: $0.1 \times 10^3/\mu\text{L}$ -- Normal range between (0.0 and 0.2)

MCV: 81.7 fL -- Normal range between (80.0 and 98.0)

MCHC: 32.9 g/dL -- Normal range between (33.0 and 36.0)

11/25/2019 3:09:59 PM -0500 FAXCOM

Muniz, Rolando

Inspira Medical Center Vineland

Patient Name: F81986280, FEDERAL

MRN: 900582366

Admit: 11/18/2019

FIN: 0078109963

Disch: 11/22/2019

DOB/Age/Sex: 8/24/1980 39 years Male

Admitting: Struby, DO, Christopher

Emergency Documentation

you let him or her check you and report any new or remaining problems since it is impossible to recognize and treat all elements of an injury or illness in a single emergency care center visit.

Physician/Specialist - If you do not have a Primary Care Provider (PCP) or require a Specialist you may utilize the Inspira Health Network Website at www.InspiraHealthNetwork.org or the physician referral line at 1-800-Inspira to locate a physician or specialist of your choice.

Inspira Survey - Inspira strives to provide excellent Customer service and values feedback to help us improve. If you receive a survey in the mail or by email, we would appreciate you taking the time to complete it. Thank you for choosing Inspira Health Network.

Comment:

F81986280, FEDERAL has been given the following list of follow-up instructions, prescriptions, and patient education materials:

Hypertension:

During your visit today you had a blood pressure reading that is higher than normal. A normal reading is less than 120/80. Your blood pressure today was 136/88. A high reading may indicate that you have one of the 2018 American Heart Association new blood pressure categories. Please schedule follow up with your primary care provider or referral provider for a re-check and further evaluation within the next 1-2 weeks.

One high blood pressure reading does not mean you necessarily have the diagnosis of hypertension. High blood pressure readings can be due to pain, fever, anxiety, or other reasons. A high blood pressure reading is unlikely to cause immediate harm, but in the long term, it puts you at risk for high blood pressure related problems such as stroke, heart disease and kidney failure. Hypertension can usually be controlled with lifestyle changes and/or medication. Lifestyle changes may include losing weight (if you are overweight), reducing salt intake, limiting alcohol, eating a healthy diet, beginning an exercise program, limiting caffeine, and stopping smoking. If you already take blood pressure medications, they may need to be adjusted.

A diagnosis of high blood pressure (also called hypertension) is a chronic disease. Blood pressure categories in the new 2018 guideline are:

- Normal: Less than 120/80 mm Hg;
- Elevated: Systolic between 120-129 and diastolic less than 80
- Stage 1: Systolic between 130-139 or diastolic between 80-89
- Stage 2: Systolic at least 140 or diastolic at least 90 mm Hg
- Hypertensive crisis: Systolic over 180 and/or diastolic over 120, with patients needing prompt changes in medication and visit with the doctor if there are no other indications of problems, or immediate hospitalization if there are signs of organ damage.

Muniz, Rolando

Inspira Medical Center Vineland

Patient Name: F81986280, FEDERAL

MRN: 900582366

Admit: 11/18/2019

FIN: 0079109963

Disch: 11/22/2019

DOB/Age/Sex: 8/24/1980 39 years Male

Admitting: Struby, D.O., Christopher

Emergency Documentation

Document Type:

ED Note Physician

Service Date/Time:

11/18/2019 19:07 EST

Result Status:

Modified

Document Subject:

ED Note

Sign Information:

Kelley, D.O., Cecylia (11/18/2019 20:35 EST); Chang, D.O.
PGY3, Robert (11/18/2019 19:47 EST)

Addendum by Kelley, D.O., Cecylia on November 18, 2019 20:35:24 EST

Diagnosis This Visit: Diabetic ulcer of toe; Failure of outpatient treatment

ATTESTATION: I personally saw and evaluated the patient. I have reviewed and agree with the resident's findings, including the exam, HPI, all diagnostic interpretations and plans as written unless otherwise noted in my documentation. The care plan articulated in the discharge instructions are consistent with our discussion of the patient's care and I confirm the diagnosis as documented. I was present for the inclusive time noted in any CC statement.

Surgery Hx: none

Electronically Signed on 11/18/19 20:35 by Kelley, D.O., Cecylia

Basic Information

Chief Complaint

from fairton prison- left foot 2nd toe increasing wound, more swollen, painful, redness. not improving with antibiotics.

ED Assigned Provider/Time

Time Seen:

Kelley, D.O., Cecylia / 11/18/2019 15:48

History of Present Illness

Patient is a 39-year-old male with past medical history of diabetes and hyperlipidemia is presenting for from presenting with complaints of left second lower extremity infection. Patient reports that he has his left second digit on the dorsum of his foot that has been ongoing for 2 to 3 weeks. Patient reports that he was placed on Bactrim, he reports that this has not helped his symptoms and and has otherwise been gradually worsening. Patient reports that he does have some radiation of pain up into his foot, he reports that otherwise he has been having tactile fevers and subjective chills, otherwise he has not noticed other signs or symptoms at this time.

Review of Systems

Nurse's Note Reviewed

Constitutional: Tactile fevers and chills, no sweats

Eye: No recent visual problems

ENMT: No ear pain, nasal congestion, sore throat

Respiratory: No shortness of breath, cough

Cardiovascular: No Chest pain, palpitations, syncope

Gastrointestinal: No nausea, vomiting, diarrhea

Genitourinary: No hematuria

Hema/Lymph: Negative for bruising tendency, swollen lymph glands

Endocrine: Negative for excessive thirst, excessive hunger

Musculoskeletal: No back pain, neck pain, joint pain, muscle pain, decreased range of motion

Integumentary: Positive for infection and ulcer to the left second digit of the dorsum of the foot

Neurologic: Alert & oriented X 4

Psychiatric: No anxiety, depression

14 point review of systems is complete and negative unless otherwise indicated

11/25/2019 3:09:59 PM -0500 FAXCOM

Muniz, Rolando

Inspira Medical Center Vineland

Patient Name: F81986280, FEDERAL

MRN: 900582366

Admit: 11/18/2019

FIN: 0079109963

Disch: 11/22/2019

DOB/Age/Sex: 8/24/1980 39 years Male

Admitting: Struby, DO, Christopher

Emergency Documentation

Comment:

Inmate Name: MUNIZ, ROLANDO

Date of Birth: 08/24/1980

Encounter Date: 11/22/2019 18:19

Sex: M Race: WHITE

Provider: Nguyen, Thang RN

Reg #: 81986-280

Facility: FAI

Unit: B04

Date	Time	Value(%)	Alr	Provider
------	------	----------	-----	----------

Exam:

General

Appearance

Yes: Appears Well, Alert and Oriented x 3

No: Appears Distressed

Comments

Inmate was given discharge instructions and night stock medications were given as ordered. Inmate given tape for keep left foot dry during showers. Instructed inmate to return daily at 9AM for wound care. Inmate verbalized understanding. Inmate instructed on procedure for getting his medical records.

ASSESSMENT:

Condition Stable

PLAN:**Medication Reconciliation.**

The patient's known medication list including OTC items was compiled and compared to new and changed BOP orders.

Discontinued Medication Orders:

Rx#	Medication	Order Date	Prescriber Order
137904-FAI	Sulfamethoxazole/Trimeth 800mg /160mg tab	11/22/2019 18:19	Take one tablet by mouth two times a day Take with a glassful of water for 10 days ***It is important to finish ALL of this medication*** - 3 day supply issued from NIGHT STOCK

Discontinue Type: Immediate

Discontinue Reason: *discontinue*

Indication:

Reconciled Medications:

Source	Action	Type	Rx#	Medication	Order Detail
BOP	Continue	Rx	Order	Acetaminophen 325 MG Tablet	650 mg Orally - three times a day PRN x 5 day(s)
BOP	Continue	Rx	Order	Amoxicillin Capsule	500 mg Orally - three times a day x 5 day(s) -- BEGIN ON 11/23/2019
BOP	Continue	Rx	135187-FAI	Atorvastatin 20 MG TAB	Take one tablet (20 MG) by mouth at bedtime
BOP	Continue	Rx	Order	Atorvastatin Tablet	Take one tablet (20 MG) by mouth at bedtime x 365 day(s)
BOP	Continue	Rx	Order	Ibuprofen Tablet	600 mg Orally - three times a day PRN x 5 day(s)
BOP	Discontinue	Rx	137904-FAI	Sulfamethoxazole/Trimeth 800mg /160mg tab	Take one tablet by mouth two times a day Take with a glassful of water for 10 days ***It is important to finish ALL of this medication*** - 3 day supply issued from NIGHT STOCK

Discontinue Reason: *discontinue*

Inmate Name: MUNIZ, ROLANDO

Reg #: 81986-280

Date of Birth: 08/24/1980

Sex: M Race: WHITE

Facility: FAI

Encounter Date: 11/22/2019 18:19

Provider: Nguyen, Thang RN

Unit: B04

<u>Source</u>	<u>Action</u>	<u>Type</u>	<u>Rx#</u>	<u>Medication</u>	<u>Order Detail</u>
		OTC		No known OTCs	

New Consultation Requests:

<u>Consultation/Procedure</u>	<u>Target Date</u>	<u>Scheduled Target Date</u>	<u>Priority</u>	<u>Translator</u>	<u>Language</u>
Podiatry	11/23/2019	11/23/2019	Routine	No	

Subtype:

PODIATRY FOLLOW UP VISIT

Reason for Request:

Follow up in 1 week with Dr. Watson

Disposition:

Follow-up Daily

Other:

Patient allergies reviewed and needed updates applied during this visit. See Chart: Allergies for most recent patient allergy list.

Patient Education Topics:

<u>Date Initiated</u>	<u>Format</u>	<u>Handout/Topic</u>	<u>Provider</u>	<u>Outcome</u>
11/22/2019	Counseling	Access to Care	Nguyen, Thang	Verbalizes Understanding
11/22/2019	Counseling	Plan of Care	Nguyen, Thang	Verbalizes Understanding
11/22/2019	Counseling	Wound Care	Nguyen, Thang	Verbalizes Understanding

Copay Required: No**Cosign Required:** Yes**Telephone/Verbal Order:** Yes **By:** Lopez de Lasalle, Abigail MD**Telephone or Verbal order read back and verified.**

Completed by Nguyen, Thang RN on 11/22/2019 18:29

Requested to be cosigned by Lopez de Lasalle, Abigail MD.

Cosign documentation will be displayed on the following page.

11/25/2019 3:09:59 PM -0500 FAXCOM

Muniz, Rolando

Inspira Medical Center Vineland

Patient Name: F81986280, FEDERAL

MRN: 900582366

Admit: 11/18/2019

FIN: 0079109963

Disch: 11/22/2019

DOB/Age/Sex: 8/24/1980 39 years Male

Admitting: Struby, DO, Christopher

Consultation Notes

Vitals & Measurements

T: 37.0 °C (Oral) HR: 89 (Peripheral) RR: 16 BP: 139/92 SpO2: 100% HT: 188 cm WT: 82 kg (Measured) WT: 82.000 kg (Dosing)

Allergies

No Known Allergies

Problem List/Past Medical HistoryOngoing

Diabetes

History of hyperlipidemia

Historical

No qualifying data

MedicationsInpatient

Vancomycin - Pharmacy to Dose (Rx), 1 EA, Misc, As Directed

Home

atorvastatin 20 mg oral tablet, 20 mg, 1 tab, Oral, Daily

sulfamethoxazole-trimethoprim 800 mg-160 mg oral tablet

Social HistoryAlcohol

Denies use

Substance Use

Denies

Imaging Results (Last 24 Hours)

No Results

Lab ResultsHematologyWBC: 9.5 x10³/uL

(11/18/19 17:21:00)

RBC: 4.39 x10⁶/uL

(11/18/19 17:21:00)

Hgb: 11.8 g/dL Low

(11/18/19 17:21:00)

Hct: 35.9 % Low (11/18/19

17:21:00)

MCV: 81.7 fL (11/18/19

17:21:00)

MCH: 26.5 pg Low

(11/18/19 17:21:00)

MCHC: 32.9 g/dL Low

(11/18/19 17:21:00)

RDW: 14.3 % (11/18/19

17:21:00)

Platelets: 222 x10³/uL

(11/18/19 17:21:00)

MPV: 9.6 fL (11/18/19

17:21:00)

Neutro Auto: 67.8 %

Chemistry

Glucose Level: 102

mg/dL High (11/18/19

17:21:00)

BUN: 19 mg/dL (11/18/19

17:21:00)

Creatinine Level: 0.8

mg/dL (11/18/19 17:21:00)

BUN/Creat Ratio: 23.8

mg/dL (11/18/19 17:21:00)

Sodium Level: 140 mmol/L

(11/18/19 17:21:00)

Potassium Level: 4.1

mmol/L (11/18/19

17:21:00)

Chloride Level: 105

mmol/L (11/18/19

17:21:00)

CO2: 25 mmol/L (11/18/19

17:21:00)

Anion Gap: 10 mmol/L

(11/18/19 17:21:00)

11/25/2019 3:09:59 PM -0500 FAXCOM

Muniz, Rolando

Inspira Medical Center Vineland

Patient Name: F81986280, FEDERAL

MRN: 900582366

Admit: 11/18/2019

FIN: 0079109963

Disch: 11/22/2019

DOB/Age/Sex: 8/24/1980 39 years Male

Admitting: Struby, DO, Christopher

Consultation Notes

Document Type:

Consultation Note

Service Date/Time:

11/18/2019 18:49 EST

Result Status:

Modified

Document Subject:

Consult Note

Sign Information:

Watson, D.P.M., John (11/19/2019 08:38 EST); Thomas, DPM
PGY2, Michael (11/19/2019 08:12 EST)

Addendum by Watson, D.P.M., John on November 19, 2019 08:37:57 EST

Pending MRI to r/o OM due to elevated sed rate and CRP

Electronically Signed on 11/19/19 08:38 by Watson, D.P.M., John

Reason for Consultation

Left 2nd digit ulcer

Assessment/Plan

Left foot 2nd digit soft tissue infection vs. osteomyelitis

-Patient seen and evaluated

-Left 2nd digit dorsal ulceration with no purulent drainage, erythematous, edematous, and no tenderness to palpation.

-Xrays left foot personally reviewed no ☒ fracture or obvious infectious process noted. Swelling of second digit noted. Please see official read.

-Wound cultures pending

-Dressing with betadine to left 2nd digit.

-MRI left foot ordered to evaluate soft tissue vs bone; pending

-Case was discussed with Dr. Watson who agrees with my above assessment and plan.

Chief Complaint

from fairton prison- left foot 2nd toe increasing wound, more swollen, painful, redness. not improving with antibiotics.

History of Present Illness

39-year-old male with past medical history of diabetes and hyperlipidemia is presenting for from presenting with complaints of left second digit foot infection. Patient reports that he has and ulcer on his left second digit on the dorsum of his foot that has been ongoing for 2 to 3 weeks. Patient reports that he was placed on Bactrim, he reports that this has not helped his symptoms and has otherwise been gradually worsening. Patient reports that he does have some radiation of pain up into his foot at times, he reports that otherwise he has been having tactile fevers and subjective chills, otherwise he has not noticed other signs or symptoms at this time.

Review of Systems

14 Point Review of systems was conducted and is negative unless stated in the above HPI

Physical Exam

General: AAOx3, NAD.

HEENT: Normocephalic, normal hearing, moist oral mucosa, PERRL, EOMI, normal conjunctiva, no scleral icterus, no sinus tenderness.

Vascular: Dorsalis pedis and posterior tibial pulses +1/4 b/l. Skin temperature warm to warm from proximal tibial tuberosity to distal digits b/l. CFT less than 3s to hallux b/l. Edema to left 2nd digit.

Neurological: Gross sensation intact b/l lower extremity.

Dermatological: Left 2nd digit dorsal ulceration with no purulent drainage, erythematous, edematous

Musculoskeletal: No pain on palpation to foot b/l. 4/5 muscle strength for all pedal muscle groups b/l. Range of motion diminished to ankle joint, subtalar joint, midtarsal joint, and 1st metatarsophalangeal joint b/l.

Psychiatric: Cooperative, appropriate mood and affect.

11/25/2019 3:09:59 PM -0500 FAXCOM

Muniz, Rolando

Inspira Medical Center Vineland

Patient Name: F81986280, FEDERAL

MRN: 900582366

Admit: 11/18/2019

FIN: 0079109963

Disch: 11/22/2019

DOB/Age/Sex: 8/24/1980 39 years Male

Admitting: Struby, DO, Christopher

Consultation Notes

07:18:00)	Anion Gap: 7 mmol/L
Neutro Auto: 62.9 %	(11/20/19 07:18:00)
(11/20/19 07:18:00)	Osmolality Calc: 285
Lymph Auto: 26.7 %	(11/20/19 07:18:00)
(11/20/19 07:18:00)	Calcium Level: 9.4 mg/dL
Mono Auto: 7.6 %	(11/20/19 07:18:00)
(11/20/19 07:18:00)	eGFR AA: >60 (11/20/19
Eos, Auto: 2.4 % (11/20/19	07:18:00)
07:18:00)	eGFR Non-AA: >60
Basophil Auto: 0.4 %	(11/20/19 07:18:00)
(11/20/19 07:18:00)	
Neutro Absolute: 4.3	
x10 ³ /uL (11/20/19	
07:18:00)	
Lymph Absolute: 1.8	
x10 ³ /uL (11/20/19	
07:18:00)	
Mono Absolute: 0.5	
x10 ³ /uL (11/20/19	
07:18:00)	
Eos Absolute: 0.2	
x10 ³ /uL (11/20/19	
07:18:00)	
Baso Absolute: 0 x10 ³ /uL	
(11/20/19 07:18:00)	
NRBC Auto: 0 /100(WBCs)	
(11/20/19 07:18:00)	

Electronically Signed on 11/20/19 13:46 by Khalaf, MD PGY4, Mahmoud

11/25/2019 3:09:59 PM -0500 FAXCOM

Muniz, Rolando

Inspira Medical Center Vineland

Patient Name: F81986280, FEDERAL

MRN: 900582366

Admit: 11/18/2019

FIN: 0079109963

Disch: 11/22/2019

DOB/Age/Sex: 8/24/1980 39 years Male

Admitting: Struby, DO, Christopher

Consultation Notes11/19/19 08:01:00

CLINICAL HISTORY: Left foot swelling and erythema.

TECHNIQUE: Multiplanar, multisequence MRI of the left foot.

COMPARISON: Left foot radiographs from 11/18/2019.

FINDINGS: There is intense bone marrow edema throughout the 2nd proximal and middle phalanges, with a skin ulcer dorsal to the 2nd PIP joint, compatible with septic arthritis/osteomyelitis. Erosive changes are also noted along the 2nd proximal phalangeal head. A fluid collection encircles the 2nd PIP joint, suspicious for an abscess. There is mild osteoarthritis across the 3rd and 4th Lisfranc joints. There is no fracture. The imaged joints are anatomicallly aligned.

IMPRESSION: Septic arthritis/osteomyelitis across the left foot 2nd PIP joint, as described. A fluid collection encircles the 2nd PIP joint, suspicious for an abscess.

Signed By: Bhagal, M.D., Nitesh N.

XR Foot Complete 3+ Views Left11/18/19 16:23:00

CLINICAL HISTORY: Left foot ulcer.

FINDINGS: Three views demonstrate no evidence of fracture dislocation left foot x-rays are negative.

IMPRESSION: Negative x-rays of the left foot.

Thank you

Signed By: Golestaneh, M.D., Fazlollah

Lab Results

Hematology	Chemistry
WBC: 6.8 x10 ³ /uL	Glucose Level: 123
(11/20/19 07:18:00)	mg/dL, High (11/20/19
RBC: 4.51 x10 ⁶ /uL	07:18:00)
(11/20/19 07:18:00)	BUN: 13 mg/dL (11/20/19
Hgb: 12.2 g/dL Low	07:18:00)
(11/20/19 07:18:00)	Creatinine Level: 0.7
Hct: 36.4 % Low (11/20/19	mg/dL (11/20/19 07:18:00)
07:18:00)	BUN/Creat Ratio: 18.6
MCV: 80.5 fL (11/20/19	mg/dL (11/20/19 07:18:00)
07:18:00)	Sodium Level: 142 mmol/L
MCH: 27.1 pg Low	(11/20/19 07:18:00)
(11/20/19 07:18:00)	Potassium Level: 4.4
MCHC: 33.6 g/dL	mmol/L (11/20/19
(11/20/19 07:18:00)	07:18:00)
RDW: 14.1 % (11/20/19	Chloride Level: 107
07:18:00)	mmol/L (11/20/19
Platelets: 242 x10 ³ /uL	07:18:00)
(11/20/19 07:18:00)	CO2: 28 mmol/L (11/20/19
MPV: 9.3 fL (11/20/19	07:18:00)

11/25/2019 3:09:59 PM -0500 FAXCOM

Muniz, Rolando

Inspira Medical Center Vineland

Patient Name: F81986280, FEDERAL

MRN: 900582366

Admit: 11/18/2019

FIN: 0079109963

Disch: 11/22/2019

DOB/Age/Sex: 8/24/1980 39 years Male

Admitting: Struby, DO, Christopher

Consultation Notes

Physical Exam

General: Alert and oriented, well nourished, no acute distress.

Eye: PERRL, normal conjunctiva.

HEENT: Normocephalic, moist oral mucosa.

Neck: Supple, non-tender, no JVD.

Lungs: Clear to auscultation bilaterally, non-labored respiration.

Heart: Normal rate, regular rhythm, no murmur, gallop, trace bilateral lower extremity edema.

Abdomen: Soft, non-tender, non-distended, normal bowel sounds, no masses.

Musculoskeletal: Markedly swollen Left 2nd digit. NO purulent drainage, however it is erythematous and edematous, and no tenderness to palpation.

Skin: Skin is warm, dry and pink, no rashes or lesions.

Neurologic: Awake, alert, and oriented X3, CN II-XII intact.

Psychiatric: Cooperative, appropriate mood and affect.

Vitals & Measurements

T: 36.0 °C (Temporal Artery) HR: 77 (Peripheral) RR: 18 BP: 110/56 SpO2: 99%

Allergies

No Known Allergies

Problem List/Past Medical HistoryOngoing

Diabetes

History of hyperlipidemia

Historical

No qualifying data

Procedure/Surgical History

Denies surgeries in the past

MedicationsInpatient

acetaminophen, 650 mg, 2 tab, Oral, q4hr, PRN

atorvastatin, 20 mg, 1 tab, Oral, Bedtime

cefepime, 2 g, 20 mL, IV Push, q8hr

Dextrose, 16 g, 4 tab, Oral, As Directed, PRN

Dextrose 50% in Water, 12.5 g, 25 mL, IV Push, As Directed, PRN

glucagon, 1 mg, IM, As Directed, PRN

Lovenox, 40 mg, 0.4 mL, Subcutaneous, Daily

NovoLOG Sliding Scale LOW, Sliding Scale, Subcutaneous, QID(ACHS)

Home

atorvastatin 20 mg oral tablet, 20 mg, 1 tab, Oral, Daily, . Not taking

Social HistoryAlcohol

Denies use

Substance Use

Denies

Family History

Non-Contributory

Imaging Results (Last 24 Hours)

MRI Foot w/o Contrast Left

11/25/2019 3:09:59 PM -0500 FAXCOM

Muniz, Rolando

Inspira Medical Center Vineland

Patient Name: F81986280, FEDERAL

MRN: 900582366

Admit: 11/18/2019

FIN: 0079109963

Disch: 11/22/2019

DOB/Age/Sex: 8/24/1980 39 years Male

Admitting: Struby, DO, Christopher

Consultation Notes

Document Type:

Consultation Note

Service Date/Time:

11/20/2019 09:48 EST

Result Status:

Modified

Document Subject:

ID Consult Note

Sign Information:

Galletto, M.D., David W. (11/20/2019 16:20 EST); Khalaf, MD
PGY4, Mahmoud (11/20/2019 13:46 EST)

Addendum by Galletto, M.D., David W. on November 20, 2019 16:18:27 EST

I examined the patient independently and discussed management with the fellow. I reviewed the fellow's note and agree with the documented findings, assessment and plan as written, except where noted by me. Second toe abscess with septic arthritis and contiguous osteomyelitis. Antibiotic therapy can be narrowed as group B strep is the pathogen. Duration and route to be determined by the operative procedure.

Electronically Signed on 11/20/19 16:20 by Galletto, M.D., David W.

Reason for Consultation

Diabetic Ulcer - Osteomyelitis

Assessment/PlanAbscess of 2nd Toe with associated Septic arthritis and Osteomyelitis
Diabetic foot ulcer

Pt failed outpatient PO abx therapy (Bactrim ~8days) presents with a very enlarged infected toe. MRI shows septic arthritis with an associated abscess. Nevertheless showed Osteomyelitis of the 2nd left toe. This is infection that has likely been going on for a while and not acute.

He was initially on Vancomycin and Cefepime and today he is on Cefepime alone as his wound culture grew GPC.

Change his Cefepime to Ceftidaxone 2g IV Q24hr. Depending on how his surgery/amputation goes today, we will tailor his abx regimen. A communication order was placed to obtain results of his wound cultures from prison as well. Anticipate short duration of abx.

Chief Complaint

from fairton prison- left foot 2nd toe increasing wound, more swollen, painful, redness. not improving with antibiotics.

History of Present Illness

Patient is a 39-year-old male with a past medical history of diabetes, hyperlipidemia, presented to the hospital complaining of left second toe wound that has worsened despite outpatient antibiotics.

Patient is a inmate at Fairton prison.

Patient reports that he has had an infection in the second digit of his left foot for the last 3 weeks. He believes it started off as an ulcer that has progressively been getting worse. Patient does not recall when the ulcer started exactly however he reports that he noticed a blister there a few weeks ago and it worsened with using boots that he that he believes may have caused his infection.

Patient was started on Bactrim prior to presentation. Duration was

Nevertheless he reported that he used to be on anti-diabetic medication however he was taken off it as his HbA1c was ~6. ✓

He reported pain at the site along with subjective fevers and chills.

In the ED he was found to be hemodynamically stable.

He did not appear to have a white count on his CBC. X-rays done initially in the ED of the foot show some soft tissue swelling however could not rule and osteomyelitis. Of note patient's ESR and CRP were elevated at 69 and 4.9 respectively he was started on broad-spectrum antibiotics IV Vanco and cefepime in the ED.

He was evaluated by podiatry, and an MRI of the foot was ordered which showed septic arthritis/osteomyelitis on the left foot second PIP joint with a fluid collection that is suspicious for an abscess patient is scheduled tentatively.

To go to the OR today for left second digit amputation.

Review of Systems

14 point ROS reviewed and negative except as mentioned above

11/25/2019 3:09:59 PM -0500 FAXCOM

Muniz, Rolando

Inspira Medical Center Vineland

Patient Name: F81986280, FEDERAL

MRN: 900582366

Admit: 11/18/2019

FIN: 0079109963

Disch: 11/22/2019

DOB/Age/Sex: 8/24/1980 39 years Male

Admitting: Struby, DO, Christopher

Discharge Documentation

Document Type:

Service Date/Time:

Result Status:

Document Subject:

Sign Information:

Discharge Summary

11/22/2019 14:08 EST

Auth (Verified)

Discharge Summary with Physical Exam Note

Agbo, DO PGY1, Kimberley (11/23/2019 20:36 EST)

Arrival Date

11/18/2019

Discharge Date

11/22/2019

Discharge Diagnosis

Diabetic ulcer of toe, 11/18/2019

Osteomyelitis

Diabetes

Hyperlipidemia

Condition on Discharge:

Stable

Hospital Course

Patient is a 39 year male with PMH of diabetes and HLD who presented to the ED from federal prison with nonhealing left toe wound. Patient reports he had an infection of his left foot on the 2nd digit for 3 weeks. He was started on Bactrim outpatient with no improvement. Patient reported not taking diabetes medication since being at the prison because he HgbA1c was 6.1. In the ED CRP and ESR were noted to be elevated. He was afebrile with a normal white count. Foot XR showed no findings of osteomyelitis. Podiatry was consulted from the ED and they ordered MRI. Cultures of wound were obtained and patient received 1 dose of IV vancomycin. Patient was started on Cefepime pending culture and MRI findings. MRI showed findings consistent with osteomyelitis and culture grew group B strep. Antibiotics were switched to Ceftriaxone. Patient underwent left 2nd metatarsal amputation with podiatry 11/20/19. Procedure was considered to be curative. Antibiotics were downgraded to oral amoxicillin. Patient was discharged back to prison with these antibiotics on 11/22/2019 in stable condition.

Procedures/Treatments Provided

Procedure

Date

Performed By

Amputation Foot

11/20/2019

Watson, D.P.M., John

Immunizations This Visit

No Immunizations This Visit

Discharge To:

To Jail/Prison

Care Team

Attending Physician -

Struby, DO, Christopher

Consulting Physician -

Althota, M.D., Vakula D.

Galletto, M.D., David W.

Watson, D.P.M., John

Primary Care Physician -

Copare, M.D., Fiore J.

Non-Staff, Provider

Non-Staff, Provider

11/25/2019 3:09:59 PM -0500 FAXCOM

Muniz, Rolando

Inspira Medical Center Vineland

Patient Name: F81986280, FEDERAL

MRN: 900582366

Admit: 11/18/2019

FIN: 0079109963

Disch: 11/22/2019

DOB/Age/Sex: 8/24/1980 39 years Male

Admitting: Struby, DO, Christopher

Discharge Documentation**Allergies (Reaction)**

No Known Allergies

Discharge Medications

	What	How Much	When	Instructions
New	amoxicillin (amoxicillin 500 mg oral capsule)	1 Capsules Oral (given by mouth)	3 times a day	Duration: 5 Days
Unchanged	atorvastatin (atorvastatin 20 mg oral tablet)	1 tablet Oral (given by mouth)	Every day	

	What	When	Comments
Stop Taking	sulfamethoxazole-trimethoprim (sulfamethoxazole-trimethoprim 800mg-160 mg oral tablet)		

Follow Up AppointmentsFollow Up with Watson, D.P.M., John
When

Why: Follow up with Dr. Watson within 1 week of discharge.

Where: 507 North Main St
Glassboro, NJ 08028-
8568812525Follow Up with Non-Staff, Provider
When Within 1 week**Physical Exam****Vitals & Measurements**

T: 36.2 °C (Temporal Artery) HR: 85 (Peripheral) RR: 16 BP: 120/75 SpO2: 97%

General: Alert and oriented, well nourished, no acute distress.

Eye: PERRL, normal conjunctiva.

HEENT: Normocephalic, moist oral mucosa.

Neck: Supple, non-tender, no JVD.

Lungs: Clear to auscultation bilaterally, non-labored respiration.

Heart: Normal rate, regular rhythm, no murmur, gallop, no bilateral lower extremity edema.

Abdomen: Soft, non-tender, non-distended, normal bowel sounds, no masses.

Musculoskeletal: Normal range of motion and strength, no tenderness or swelling.

Skin: Skin is warm, dry and pink, no rashes or lesions.

Ext: Left foot wrapped up to knee, no oozing or bleeding noted

Neurologic: Awake, alert, and oriented X3, CN II-XII intact.

Psychiatric: Cooperative, appropriate mood and affect.

Patient Discharge Instructions:**Diet**

Your diet: Diet as tolerated unless specified

Your diet: Diet as tolerated unless specified

11/25/2019 3:09:59 PM -0500 FAXCOM

Muniz, Rolando

Inspira Medical Center Vineland

Patient Name: F81986280, FEDERAL

MRN: 900582366

FIN: 0079109963

Admit: 11/18/2019

Disch: 11/22/2019

DOB/Age/Sex: 8/24/1980 39 years Male

Admitting: Struby, DO, Christopher

Operative Record

Culture Tissue/Bone (LEFT 2ND TOE BONE, Bone, Foot L)

Complications

None

Description of Procedure

Patient presented to preoperative holding for surgical intervention of the left foot. NPO status since midnight was confirmed along with all the history and physical exams and all preoperative studies were reviewed revealing no contraindications to the proposed procedure. All conservative measures had been exhausted and thus the patient opted for surgical intervention at this time. The patient understood all risks and benefits and verbalized understanding. All questions were answered with no guarantees were given or implied as to the outcome of the procedure. Surgical consent was signed and verbalized along with a copy placed in the patient's chart. The surgical site on the operative foot was marked with indelible ink risks. Patient was administered IV medications by the anesthesia team.

The patient was then transferred to the operating room and placed on the operating table in a supine position. IV sedation was administered per anesthesia staff and supplemented total of 10 cc's of 1% lidocaine plain 0.5% Marcaine plain injected in a digital block fashion. The operative foot was then prepped and draped in usual aseptic manner and lower to the operating table.

Attention was then directed to the left second digit. Using a marking pen a tennis racquet incision, with the linear arm extending over the proximal phalanx, was drawn around the left 2nd digit. Using a sharp #15 blade incision was carried down to bone. The second digit was disarticulated at the level of the MTPJ. A #15 blade was used to remove and free any soft tissue attachments. The remaining tissue was healthy, granular and normal in appearance without necrosis. The site was copiously irrigated using sterile saline and a pulse lavage system. The remaining metatarsal head appeared to be healthy. The metatarsal was healthy, hard, clean and free of any signs of breakdown. Proximal margin taken from removed proximal phalanx and sent for pathology and micro analysis. Healthy bleeding was noted. Deep closure was performed using 3-0 Vicryl sutures in a simple interrupted fashion. The dorsal and plantar linear arms of the incision were reapproximated and the incision was closed using 3-0 Prolene with sutures in a simple interrupted fashion. The postoperative foot was dressed with Betadine soaked Adaptic to the incision line, 4 x 4's, Kerlix, Ace.

The patient tolerated the procedure and anesthesia well. The patient was then transferred back to the PACU in stable condition. All vital signs are stable. No complications to the procedure.

Electronically Signed on 11/21/19 06:03 by Patel, DPM PGY1, Ekta

Electronically Signed on 11/21/19 09:18 by Watson, D.P.M., John

11/25/2019 3:09:59 PM -0500 FAXCOM

Muniz, Rolando

Inspira Medical Center Vineland

Patient Name: F81986280, FEDERAL

MRN: 900582366

Admit: 11/18/2019

FIN: 0079109963

Disch: 11/22/2019

DOB/Age/Sex: 8/24/1980 39 years Male

Admitting: Struby, DO, Christopher

Operative Record

Document Type:

Operative Report

Service Date/Time:

11/20/2019 17:12 EST

Result Status:

Auth (Verified)

Document Subject:

Operative Report

Sign Information:

Watson, D.P.M., John (11/21/2019 09:18 EST); Patel, DPM
PGY1, Ekta (11/21/2019 06:03 EST)**Date of Service**

11/20/2019

Indication for Surgery

Left second digit osteomyelitis with nonhealing ulcer. MRI indicated osteomyelitis throughout the left second digit PIPJ, also suspect for possible abscess.

Preoperative Diagnosis

OSTEOMYELITIS LEFT 2ND TOE/LEFT 2ND TOE ABSCESS

Postoperative Diagnosis

OSTEOMYELITIS LEFT 2ND TOE/LEFT 2ND TOE ABSCESS

Procedures Performed

Amputation Foot, SECOND TOE AMPUTATION LEFT FOOT

Surgeon(s)

Watson, D.P.M., John (Surgeon - Primary)

Assistant

Ekta Patel PGY 1

Type of Anesthesia

Monitored Anesthesia Care

Durrani, M.D., Muhammad I. (Anesthesiologist of Record)

Wilson, C.R.N.A., Brandi (CRNA - Assisting)

Urine Output

None

Estimated Blood Loss

15 cc

Drains

None

Packing

None

Implants

None

Findings

Left foot second digit amputation with nonhealing dorsal foot ulcer. The remaining metatarsal bone was hard, healthy, clean, free of any signs of breakdown. The remaining soft tissue was noted to be healthy, bleeding, granular.

Proximal margin taken from removed proximal phalanx and sent for pathology and micro analysis.

Amputation considered to be curative in nature.

Specimen(s)

Pathology Specimen Request (LEFT 2ND TOE, AP Specimen)

Muniz, Rolando

Inspira Medical Center Vineland

Patient Name: F81986280, FEDERAL

MRN: 900582366

Admit: 11/18/2019

FIN: 0079109963

Disch: 11/22/2019

DOB/Age/Sex: 8/24/1980 39 years Male

Admitting: Struby, DO, Christopher

Emergency Documentation

Document Type:

ED Clinical Summary

Service Date/Time:

11/18/2019 20:57 EST

Result Status:

Auth (Verified)

Document Subject:

ED Clinical Summary

Sign Information:

Corsey, RN, Katelyn (11/18/2019 20:57 EST)

ED Clinical Summary

Inspira Medical Center Vineland

1505 W. Sherman Avenue

Vineland, NJ 08360

(856) 641-8000

Discharge Instructions (Clinical)

PERSON INFORMATION

Name: F81986280, FEDERAL DOB: 8/24/1980 Age: 39 Years

MRN: 900582366 FIN: 0079109963

Address and Phone: FAIRTON FEDERAL PRISON FAIRTON NJ 08320 (856)453-1177

DISCHARGE INFORMATION

Date of Discharge:

Diagnosis: Diabetic ulcer of toe; Failure of outpatient treatment

PROVIDERS

Primary Care Provider:

Name: Non-Staff, Provider

Phone:

Emergency Department Providers:

Provider	Role	Assigned	Unassigned
Kelley, D.O., Cecylia	ED Provider	11/18/2019 15:48:23	
Chang, D.O. PGY3, Robert	ED Resident	11/18/2019 15:48:29	
Leano, RN, Cristencia	ED Nurse	11/18/2019 15:50:00	
Pitman, Jessica	ED Reg Clerk	11/18/2019 15:56:48	

Comment:

MEDICAL INFORMATION

Vitals Information:

Vital Sign

Triage

Latest

Temp Oral

Temp Axillary

Bureau of Prisons

Health Services

Cosign/Review

Inmate Name: MUNIZ, ROLANDO
Date of Birth: 08/24/1980
Scanned Date: 11/27/2019 14:34 EST

Sex: M

Reg #: 81986-280
Race: WHITE
Facility: FAI

Reviewed by Lopez de Lasalle, Abigail MD on 11/29/2019 10:26.

Bureau of Prisons
Health Services
Medical Duty Status

Reg #: 81986-280

Inmate Name: MUNIZ, ROLANDO

Housing Status

☒ confined to the living quarters except ☒ meals ☐ pill line ☒ treatments Exp. Date: 01/01/2020
☐ on complete bed rest: ☐ bathroom privileges only Exp. Date: _____
☒ cell: ☐ cell on first floor ☐ single cell ☒ lower bunk ☐ airborne infection isolation Exp. Date: 11/01/2020
☐ other: _____ Exp. Date: _____

Physical Limitation/Restriction

☒ all sports Exp. Date: 01/01/2020
☐ weightlifting: ☐ upper body ☐ lower body Exp. Date: _____
☐ cardiovascular exercise: ☐ running ☐ jogging ☐ walking ☐ softball Exp. Date: _____
☐ football ☐ basketball ☐ handball ☐ stationary equipment
☐ other: _____ Exp. Date: _____

May have the following equipment in his / her possession:

Equipment	Start Date	End Date	Return Date
Medical Shoes	11/22/2019		
Alternate Institutional Shoes	06/16/2017	11/01/2020	

Work Restriction / Limitation:

Cleared for Food Service: ☒ Yes
☒ No Restrictions

Comments: N/A

Nguyen, Thang RN

11/28/2019

Health Services Staff

Date

Inmate Name: MUNIZ, ROLANDO Reg #: 81986-280 Quarters: B04

ALL EXPIRATION DATES ARE AT 24:00

**Bureau of Prisons
Health Services
Immunizations****Begin Date:** 11/29/2018**End Date:** 11/29/2019**Reg #:** 81986-280**Inmate Name:** MUNIZ, ROLANDO

<u>Immunization</u>	<u>Immunization Date</u>	<u>Administered</u>	<u>Location</u>	<u>Dosage</u>	<u>Drug Mfg.</u>	<u>Lot #</u>	<u>Exp Date</u>
Influenza - Immunization	10/11/2019	Now	Left Deltoid	0.5mL	GSK	5mm97	06/30/2020
FLUARIX QUADRIVALENT							

Orig Entered: 10/11/2019 11:09 EST Anderson, Rita RN**Total:** 1

Inmate Name: MUNIZ, ROLANDO

Date of Birth: 08/24/1980

Sex: M Race: WHITE

Reg #: 81986-280

Facility: FAI

Encounter Date: 12/02/2019 08:20

Provider: Fuller, Kayla PA

Unit: B04

Date Initiated **Format**

12/02/2019 Counseling

Handout/Topic

Plan of Care

Provider

Fuller, Kayla

OutcomeVerbalizes
Understanding**PLAN:****1. DM**

- Reviewed labs, last A1c=6.9% up from 6.1%
- Will restart Metformin 500 mg BID, discussed started at 500 daily and increased to 500 BID if he has any GI upset or issues
- Can f/u with sick call request with any other concerns or questions

2. S/P 2nd toe partial amputation: Wound looks good today, no signs of infection

- Continue wound care as you are
- Due for F/U with podiatry soon
- Discussed that they will remove sutures

3. Abnormal labs

- Reviewed labs, had low testosterone at 233 and elevated sed rate, will repeat

Copay Required: No**Cosign Required:** Yes**Telephone/Verbal Order:** No

Completed by Fuller, Kayla PA on 12/02/2019 09:04

Requested to be cosigned by Lopez de Lasalle, Abigail MD.

Cosign documentation will be displayed on the following page.

**Bureau of Prisons
Health Services
Cosign/Review**

Inmate Name:	MUNIZ, ROLANDO	Reg #:	81986-280
Date of Birth:	08/24/1980	Sex:	M
Encounter Date:	12/02/2019 08:20	Provider:	Fuller, Kayla PA
		Race:	WHITE
		Facility:	FAI

Cosigned by Lopez de Lasalle, Angail MD on 12/02/2019 14:44.

Inmate Name: MUNIZ, ROLANDO

Reg #: 81986-280

Date of Birth: 08/24/1980

Sex: M Race: WHITE

Facility: FAI

Encounter Date: 01/07/2020 12:31

Provider: Lopez de Lasalle, Abigail

Unit: B04

1. Pt is currently working in Kitchen. I did speak with his supervisor who advised he is standing most of the time.

PLAN: Have Pt terminated from current employment due work conditions which could contribute to worsening his condition or slowing down the healing process.

2. Pt will be evaluated tomorrow by Podiatrist. In preparation for this evaluation I have order new X ray of bilateral feet.

3. Medical Shoe wear: special shoes have been ordered. we are pending delivery of the same.

Patient Education Topics:

Date Initiated Format

01/07/2020 Counseling

Handout/Topic

Plan of Care

Provider

Lopez de Lasalle,
Abigail

Outcome

Verbalizes
Understanding

PLAN:

1. Pt is currently working in Kitchen. I did speak with his supervisor who advised he is standing most of the time. PLAN: Have Pt terminated from current employment due work conditions which could contribute to worsening his condition or slowing down the healing process.

2. Pt will be evaluated tomorrow by Podiatrist. In preparation for this evaluation I have order new X ray of bilateral feet.

3. Medical Shoe wear: special shoes have been ordered. we are pending delivery of the same.

Copay Required: No

Cosign Required: No

Telephone/Verbal Order: No

Completed by Lopez de Lasalle, Abigail MD on 01/07/2020 13:04

EXHIBIT-4

Administrative Remedy No. 1005402-A2

Part B - Response

This is in response to your Central Office Administrative Remedy Appeal wherein you allege deliberate indifference you have received inadequate medical care for a left foot wound. You claim your clinical provider exposed you to substantial risk of harm and was the proximate cause of your toe amputation. For relief, you request an investigation, a copy of your entire medical record and monetary compensation.

FEB 15 2022

We have reviewed documentation relevant to your appeal and, based on our findings, concur with the manner in which the Warden and Regional Director responded to your concerns at the time of your Request for Administrative Remedy and subsequent appeal. Based on this information, there is no evidence to substantiate your claim of being denied appropriate medical care. We also do not find evidence to substantiate your contention of deliberate indifference on the part of medical staff; therefore, we find no rational warranting your request for investigation.

Regarding your request for your entire medical record, you can submit an Inmate Request to Staff form to request the portion of your medical record you would like to acquire.

Regarding your request for monetary compensation, Program Statement 1330.18, Administrative Remedy Program, does not provide such relief. There are statutorily-mandated procedures in place for addressing such requests. Therefore, your request will not be considered in this response.

The record reflects you have received medical care and treatment in accordance with evidence based standard of care and within the scope of services of the Federal Bureau of Prisons. You are encouraged to comply with proposed medical treatment so Health Services can continue to provide essential care and to contact medical personnel through routine sick call procedures should your condition change.

Considering the foregoing, this response is provided for informational purposes only.

6/21/21

Date

TC

Ian Connors, Administrator
National Inmate Appeals

(iw)

EXHIBIT-5

AFFIDAVIT OF ROLANDO MUNIZ

Having been duly sworn under the penalty of perjury, I, Rolando Muniz, state the following:

1. My name is Rolando Muniz, #81986-280. I am a Federal inmate at FCI Otisville.

2. Even before I was in the Federal Holding in San Antonio, TX GEO in 2011, I was a diabetic. So upon my arrival at the Federal Holdover, my health care provider immediately placed me on diabetic medicine;

3. Thereafter, when I was transferred to FCI Mariana, I was under the medical care of Ms. Gardner, who for years had regulated and controlled the dose of my Metformin and other medicine based on my A1C readings. To avoid diabetic ulcers, Dr. Garner prescribed me the soft shoes and bottom bunk pass.

4. During my stay in FCI Mariana, I was seen by a foot doctor, who checked my foot ulcers and who agreed with the regimen of Dr. Gardner;

5. Sometime in March 2018, I dropped out of the gang life and signed a drop out package. So on September 18, 2018, as a part of debriefing procedure, I was placed in FCI Mariana SHU, where I stayed for over 10 months. However, due to Hurricane in Florida we were briefly transferred to FCI Yazoo; but Dr. Gardner continued to be my medical provider;

6. During the 10 months period in the SHU I practically starved and my A1C came down to 6.1. So sometime in June 2019,

6-18-22

when I was still in SHU, Dr. Alexander reduced my diabetes medicine to 500 gms per day;

7. In July 2019, I was transferred to FCI Fairton and released to the general population, where I was free to get my commissary and eat like other inmates in the prison;

8. On July 10, 2019 I was seen by my new medical health care provider, Dr. Abigail Lopez de Lasalie (Dr. Lopez), who told me that she did not think I needed to be on the diabetes medicine because my A1C was 6.1. So she was taking me off the medicine, taking me off the soft shoes, and taking away my bottom bunk pass. She said that she will not make BOP pay for something which was not required;

9. I pleaded to Dr. Lopez that I had been a diabetic for over 10 years, and that the reduction of A1C to 6.1 was temporary and due to the fact that I had been starving in the SHU for the past 10 months. I also requested Dr. Lopez to wait until the new blood report to discontinue my diabetes medicine. Dr. Lopez refused to even check my foot ulcers;

10. Ignoring my pleas, Dr. Lopez immediately took me off my diabetes medicine, soft shoe pass and bottom bunk pass and forced me to wear the hard institutional boots and to cell on the top bunk in the prison;

11. Less than 3 months after the disconituation of my medicine, my sugar levels and A1C levels increased and my diabetic ulcers were full of puss and were painful;

12. On November 7, 2019, I was seen by medical staff who scheduled me for a daily wound care and ordered for a wound

culture. However, on 60% of the days the medical staff refused to care for my wound citing one excuse of the other;

13. On Saturday, November 16, 2019 when I was in extreme pain, I showed my wound to the Unit Officer D. Sterling and requested him to call medical and to ask them to check out my foot ulcers. Officer Sterling told me that the medical staff had told him to tell me to come to medical the next day;

14. The next day, on Sunday, November 17, 2019, I again requested Officer Sterling to call medical and he once again told me that the medical had told him to tell me to come the next day on Monday. However, the medical staff later lied on the medical records that I had refused to come to the medical for my wound care;

15. By Monday, November 18, 2019, my foot ulcer was festering with puss oozing out and I was in extreme pain. So in the chow line I showed my wound to HSA Murphy and also asked him if he had received my e-mails. HSA Murphy immediately took me to the medical and I was seen by Dr. Magan, who told HSA Murphy that I needed to be transported to Emergency Room immediately.

16. I was taken to Inspiria County Hospital, where I was seen by Dr. Patel and Dr. Watson. I told them all the facts of how I was diabetic and how I had been taken off the diabetes medicine in July by Dr. Lopez. I was placed on antibiotics, which was changed after the culture;

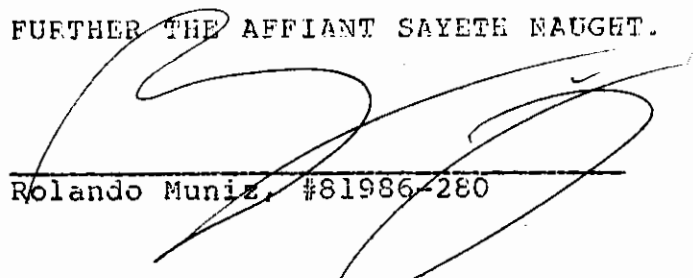
17. On Tuesday, November 19, 2019, Dr. Patel and Dr. Watson performed an MRI and determined that the infection had

spread to the bone and that they had no choice but to amputate my toe;

18. Next day on Wednesday, November 20, 2019, Dr. Patel and Dr. Watson amputated my toe and two days later I was discharged from the hospital and returned back to prison;

19. A few days after my return to prison the medical staff learned that my A1C levels had gone up, and on December 2, 2019 I was once again placed on Diabetes medicine where I remain today. Last time I remember my A1C was close to 7.5.

FURTHER THE AFFIANT SAYETH NAUGHT.


Rolando Muniz, #81986-280

1-10-2022